

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : INCFILE.COM LLC
Account Number : I20220000070
Phone : (888)462-3453
Fax Number : (877)919-2613

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: EFILE1234@INCFILE.COM

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN**828 LAUREL LLC**

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2023 JAN 23 PM 6:24

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Corporate Filing Menu

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COVER LETTER

Registration Section
Division of Corporations

828 LAUREL LLC

SUBJECT: _____
Name of Limited Liability Company

Enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

LOVETTE DOBSON

Name of Person

Firm/Company

17350 STATE HWY 249 #220

Address

HOUSTON, TX 77064

City/State and Zip Code

EFILE1234@INCFILE.COM

E-mail address (to be used for future annual report notification)

For further information concerning this matter, please call:

LOVETTE DOBSON

8884623453

Name of Person

Area Code (_____) _____

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

828 LAUREL LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

Articles of Organization for this Limited Liability Company were filed on 07/28/2020 and assigned document number 120000223975.

Amendment is submitted to amend the following:

Changing name, enter the new name of the limited liability company here:

The name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

New principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

New mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

Amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:	REPUBLIC REGISTERED AGENT LLC
New Registered Office Address:	1150 NW 72nd Ave Lower E Ste 455
	Enter Florida street address
	Miami, Florida 33126
	City State Zip Code

Registered Agent's Signature, if changing Registered Agent:

I accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Laetitia Roberson
If Changing Registered Agent, Signature of New Registered Agent

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nending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added
removed from our records:

R = Manager
BR = Authorized Member

<u>R</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
BR	CONSTANTINE KOROVKIN	2603 78TH AVE NE	☐ Add
		MEDINA, WA 98039	☒ Remove
			☐ Change
BR	NADIA POSTUPNA	2603 78TH AVE NE	☐ Add
		MEDINA, WA 98039	☒ Remove
			☐ Change
BR	BLOBFISH LLC	2603 78th Ave Ne.	☒ Add
		Medina, WA 98039	☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Effective date, if other than the date of filing: _____ (optional)

If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing (Pursuant to 605 0207 13)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the document is filed

Effective date: JANUARY, 20

2023

ted

Constantine Korovkin

Signature of a member or authorized representative of a member

Constantine Korovkin - Authorized Representative of BIOBISH LLC

Typed or printed name of signee