120000254357

(Reque	stor's Name)	
(Addres	ss)	
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(Addres	is)	
(City/St	ate/Zip/Phone #)	
PICK-UP	WAIT	MAIL
(Busine	ss Entity Name)	
(Docum	ent Number)	
Certified Copies	Certificates of	Status
<u></u>		
Special Instructions to Filin	g Officer:	





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COVER LETTER

TO: Re	egistration Security	ction porations	•	•	•	•
SUBJECT	ATV MOTO	ORS, L.IC.				
SUBJECT	·	Name of Lim	ited Liability Company			
The enclose	ed Articles of A	Amendment and fee(s) are sub	mitted for filing.			
Please retur	rn all correspor	ndence concerning this matter	to the following:			
		AGNESSA BOBKOVA				
			Name of Person		_	
		ATV MOTORS, L.L.C.				
			Firm/Company		_	
		2120 WILEY ST				
		•	Address		. s	
		HOLLYWOOD, FL, 3302	0		SEG: L	n
			City/State and Zip Code			Factories 2
		INFO@ATVENTURES-A			7 P	53
Desir Gentlesen	information of		to be used for future annual report no	tification)	PH 1:56	
ror turtner	miormation ce	oncerning this matter, please c	au:		FFF FATE	
AGNESSA	BOBKOVA		954 842-8700 at ()		, ,	
	Name of	Person		me Telephone Numbe	<u> </u>	
Enclosed is	a check for th	e following amount:				
□ \$25.00	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	■ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	ite of Status &	
R	ailing Address	Section	Street Address: Registration Se			
	ivision of Co O. Box 632	•	Division of Co The Centre of			
	allahassee, F			oe Street, Suite 8	310	

Tallahassee, FL 32303

. ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limit	ed Liability Company as it now ap (A Florida Limited Liability Compa	opears on our records.)
The Articles of Organization for this Limited L. Florida document number L.20000254357		
his amendment is submitted to amend the foll	owing:	
. If amending name, enter the new name o	f the limited liability compan	<u>ıv here</u> :
he new name must be distinguishable and contain the v	vords "Limited Liability Company,"	the designation "L.L.C." or the abbreviation "L.L.C."
nter new principal offices address, if applic	eable:	
Principal office address MUST BE A STREE	ET ADDRESS)	2023 H 50 T
		= 5
nter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE	<u>BOX)</u>	
		FL 56
b. If amending the registered agent and/or gent and/or the new registered office address Name of New Registered Agent:		our records, <u>enter the name of the new regist</u>
	2120 WILEY ST	
New Registered Office Address:		er Florida street address
	HOLLYWOOD	Florida 33020
	City	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby 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 accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being 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.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person_being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	VASILII BOBKOV	2120 WILEY ST., HJOLLYWOOD, FL, 33020	□Add
	·		■Remove
			□Change
AMBR	AGNESSA BOBKOVA	H00 BRICKEL BAY DR. APT. 5 HLMIAMI, FL 33	313 ■ Add
			□Remove
			□Change
			
		() \f 	2023Remove II
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Typed or printed name of signee