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To:			
	Division of Co	porations	
	Fax Number	: (850)617-6383	
From:			
	Account Name	: SORSHER & ASSOCIATES, LLC.	
	Account Number		
	Phone	: (954)842-2931	
	Fax Number	: (954)842-2936	£2
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**Enter	the email address	for this business entity to be used for fut	ure 😂 👚
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN LANA PROJECT, L.L.C.

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COVER LETTER

	istration Section sion of Corporations
SUBJECT.	LANA PROJECT, L.L.C.
SUBJECT: _	Name of Limited Liability Company
	Articles of Amendment and fee(s) are submitted for filing. all correspondence concerning this matter to the following:
	GARBUZOVA, SVETLANA
	Name of Person
	LANA PROJECT, L.L.C.
	Firm/Company
	4101 NE 18TH AVE
	Address
	OAKLAND PARK, FL 33334
	City/State and Zip Code
	svgarbuzova@gmail.com E-mail address: (to be used for future annual report notification)
For further info	ormation concerning this matter, please call:
	A, SVETLANA 786 202-4026
	Name of Person Area Code Daytime Telephone Number
Enclosed is a ch	heck for the following amount:
■ \$25.00 Filir	ing Fee S30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy Certified Copy (additional copy is enclosed) 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Lim	Ited Liability Comp (A Florida Limited	any as it now appears on our r Liability Company)	ecords.)	
The Articles of Organization for this Limited I Florida document number L20000271963	Liability Company	were filed on		and assigned
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name (of the limited liab	oility company here:		
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation	"LLC" or the abbrevia	tion "L.L.C."
Enter new principal offices address, if applic	cable:	4101 NE 18TH AVE		
(Principal office address MUST BE A STREET ADDRESS)		OAKLAND PARK, FL 3:	3334	
Enter new mailing address, if applicable: <u>Mailing address MAY BE A POST OFFICE BOX)</u>		4101 NE 18TH AVE OAKLAND PARK, FL 33		(~)
B. If amending the registered agent and/or r agent and/or the new registered office addre	registered office a ss <u>here</u> :	address on our records, er	ater the name of t	
Name of New Registered Agent:		·····	د	
New Registered Office Address:	4101 NE 18TH	AVE	; 1 ⁴	<u> </u>
		Enter Florida street ad		
	OAKLAND PA	.RK. City	Florida 33334	Code
		City	Ζιp	Lude

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>	Name	Address	Type of Action
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			CiRemove
			☐ Change
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			□Remove
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Effective date, if other than the (If an effective date is listed, the date must Note: If the date inserted in this bl document's effective date on the D	st be specific and cannot be prior to lock does not meet the applica	to date of filing or more than	(optional) 90 days after filing.) Pursuant to 60. ements, this date will not be list	5.0207 (3 ted as th
ne record specifies a delayed effectivord is filed.	e date, but not an effective tin	ne, at 12:01 a.m. on the e	arlier of: (b) The 90th day afte	er the
Dated	2024	<u> </u>		
	Systlana Garbus Signature of a member or author	jova		

Filing Fee: \$25.00