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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

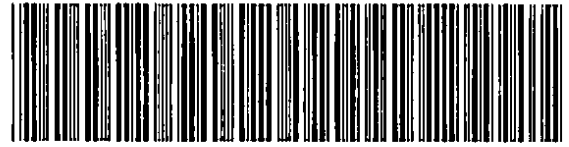
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2021 NOV 15 PM 1:03  
OFFICE OF STATE  
CLERK

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Anastasiia Zaitseva LLC  
Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

Anastasiia Zaitseva  
Name of Person

Firm/Company

5425 SW 76<sup>th</sup> Ter  
Address

Gainesville, FL, 32608  
City/State and Zip Code

anastasiia13zaitseva@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Anastasiia Zaitseva at ( 646 ) 683-7379  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |   |   |  |  |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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**

Anastasiia Zaitseva LLC

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

The Articles of Organization for this Limited Liability Company were filed on 12/18/2020 and assigned  
Florida document number L 200003955.87

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

Simple Solution Homebuyers LLC

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

**Enter new principal offices address, if applicable:**

remaining the same

**(Principal office address MUST BE A STREET ADDRESS)**

**Enter new mailing address, if applicable:**

remaining the same

**(Mailing address MAY BE A POST OFFICE BOX)**

**B. If 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:

n/a

New Registered Office Address:

Enter Florida street address

Florida

City

**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.

n/a

**If Changing Registered Agent, Signature of New Registered Agent**

2021 NOV 15 PM 8:03  
CLERK OF STATE  
FLORIDA

n/a

**AMBR = Authorized Member**

[illegible]

