(Requestors Name)
(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) (PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer J. HORNE MAR - 1 2023
(Address)
(City/State/Zip/Phone #)
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RECEIVED

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 02/28/2023	_	₩WALK IN
ENTITY NAME Tanuk	River Landing LLC	
DOCUMENT NUMBER_		
	PLEASE FILE THE ATTACHED AND RETURN	
xxxxxx	Plain Copy Certified Copy Certificate of Status	
ær	PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY**	_
	Certified Copy of Arts & Amendments Certificate of Good Standing	·····
	APOSTILLE' / NOTARIAL CERTIFICATION	
COUNTRY OF DESTINA NUMBER OF CERTIFICA		
TOTAL OWED \$25	ACCOUNT #: 1201600000	072
Please call Tina at t	the above number for any issues or concerns. Thank you	so much!

COVER LETTER

TO:

Registration Section

Divi	ision of Cor	porations		
OND ID OT	TANUKI R	IVER LANDING LLC		
SUBJECT:		Name of Lin	nited Liability Company	
The enclosed	Articles of	Amendment and fee(s) are su	bmitted for filing.	
Please return	all correspon	ndence concerning this matte	to the following:	
		Klara Fishman-Sitbon, Es	q.	
			Name of Person	
		Law Offices of Fishman-S	Sitbon, P.A.	
			Firm/Company	
		20900 NE 30th Ave. Unit	835	
		***************************************	Address	
		Aventura, FL 33180		
			City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·
		kfishman@fsplegal.com	to be used for future annual report no	rification)
For further inf	formation co	ncerning this matter, please o	·	uncationy
		•		
Klara Fishman-Sitbon, Esq. Name of Person		at ()		
	ivaine or	rerson	Area Code Daytin	ne Telephone Number
Enclosed is a c	check for the	following amount:		
■ \$25.00 Fil	ling 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)
Regi Divis P.O.	ng Address: stration Session of Co Box 6327 ahassee, FI	rporations	Street Address: Registration Se Division of Co The Centre of 7 2415 N. Monro	rporations

Tallahassee, FL 32303

TO ARTICLES OF ORGANIZATION OF

Market Company of the ARTICLES OF AMENDMENT

(Name of the Li	mited Liability Compan (A Florida Limited Li	y as it now appears on our records.) ability Company)		
The Articles of Organization for this Limited Florida document number L21000037059	Liability Company v	vere filed on <u>01/19/2021</u>	and assigned	
This amendment is submitted to amend the fo	ollowing:			
A. If amending name, enter the new name	of the limited liabil	ty company here:		
The new name must be distinguishable and contain the	words "Limited Liability	y Company," the designation "LLC" or t	he abbreviation "L.L.C."	
Enter new principal offices address, if appl	licable:			
Principal office address MUST BE A STRE	EET ADDRESS)			
			· · · · · · · · · · · · · · · · · · ·	
•				
Inter new mailing address, if applicable:		· · · · · · · · · · · · · · · · · · ·	·	
Mailing address MAY BE A POST OFFICE	E BOX)			
 If amending the registered agent and/or gent and/or the new registered office addr 	registered office ad ress here:	dress on our records, enter the i	name of the new regist	
Name of New Registered Agent:				
New Registered Office Address:	20900 NE 30th Ave. Suite 835			
		Enter Florida street address		
	Aventura	Elouido.	33180	

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

TANUKI RIVER LANDING LLC

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.

City

Zip Code

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
MGR	NICOLA OPPO	1080 Alton Rd.	☐ Add
		Miami Beach, FL 33139	≡Remove
MGR	Vladimir Kulikov	1080 Alton Rd.	≣ Add
		Miami Beach, FL 33139	□Remove
			Change
· 			□ Add
			□Rеточе
			□Change
			□Add
			□ Remove
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an effect ote: If	tive date is listed, the date inserted	the date must be: d in this block	specific and does not m	cannot be price eet the annl	or to date of t icable statu	filing or more t tory filing rea	าลภ 90 days afte เบเรements th	r filing.) Pursus is date will no	unt to 605.020 at he listed a
cumen	t's effective dat	e on the Depar	tment of St	ate's record	s.	131) ////// 12/	(a, c	is dute with the	n de fisica a
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record s	pecifies a delay	ed effective da	te, but not a	an effective	time, at 12	:01 a.m. on th	e earlier of: (b) The 90th	day after the
is filed	1.								
	ebruary 24			2023					
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Filing Fee: \$25.00