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COVER LETTER

TO: Registration Sec Division of Corp			games of the contract
	999 Jou	J 110	FILED
SUBJECT:	Name of Lim	ited Liability Company	2025 JUL 22 AM 8: 06
			SECKLIAT OF STATE TALLAHASSEE, FL
The enclosed Articles of a	Amendment and fee(s) are sub	mitted for filing.	IALLAHASSEE. FL
Please return all correspon	ndence concerning this matter	to the following:	
	MAKS	Mame of Person	skiy
			,
		Fimi/Company	
	5748 F	Fox Hollow D	2 #D
	BOCA	City/State and Zip Code	33 486
	Auto E-mail address: (WOLLDHUB (to be used for future annual report noti	Doutlook. Con
For further information ed	oncerning this matter, please ca	all:	
MAKSIN	n Zasilavsk.	at (<u>954)</u> 381 Area Code Daytim	- ///) e Telephone Number
Enclosed is a check for th	e following amount:		
☐ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

OF FILED (Name of the Limited Liability Company as it now appears on our records) 22
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on Florida document number <u>L 21 000 150 141</u> This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (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: New Registered Office Address: XA LATON Florida 1

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.

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
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ffective date, if other tha an effective date is listed, the da	n the date of filin	ig:	date of filing or me	re than 90 days aft	tional) er filing) Pur	Sugnt to 6	05 D20
Note: If the date inserted in to ocument's effective date on	this block does not	meet the applicab	le statutory filing	requirements, th	nis date will	not be li	isted a
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record specifies a delayed el	ffective date, but no	t an effective tim	e, at 12:01 a.m. o	n the earlier of:	(b) The 90	th day at	fer the
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	WHI	Tua	zed representative				
	 Signature of a 	member or aumori	zed represemanye i	n a memoci			

Filing Fee: \$25.00

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Jan 1 : im

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	V LLC 2025 JUL 22 AH 8: 07
(A Florida Limited L	nv as it now appears on our records.) Liability Company) Stundent GF STATE
The Articles of Organization for this Limited Liability Company	O la 1 John DAMASSEE EL
Florida document number <u>L 21000150141</u>	
Florida document number	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	ility company here:
333 10W 21C	
The new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the new nam	- // ^
Enter new principal offices address, if applicable:	5748 Fox Hollow 1/2
(Principal office address MUST BE A STREET ADDRESS)	# D
	BOCA RATON F-1 33486
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	iddress on our records, enter the name of the new registered
agent and/of the new registered office address here.	
Name of New Registered Agent:	sim Zaslavskiy
New Registered Office Address: 57 48	FOX HOMOW D2 #L
BOCA	Rator Florida FL 33486

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.

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MGR = Manager AMBR = Authorized Member **Type of Action Title** <u>Name</u> **Address** AMBR MAKSIN ZASASKIY □Remove □Add Remove □Change \Box Add □Remove □Change □Change □Add □Remove _ DChange □Add

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	2025 JUL 22 AM 8: 07
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	TAIT VOOL OF STATE
	THE ATTASSEE, FL
ctive date, if other than the date of filing	g:(optional)
effective date is listed, the date must be specific and	I cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0 neet the applicable statutory filing requirements, this date will not be listed
ord specifies a delayed effective date, but not	an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after t
filed.	
id July 14.	2025
Refer	Alia La
Singature of a	member or authorized representative of a member

Filing Fee: \$25.00