## L21000470782

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11/15/21--01033--016 \*\*25.00

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T. MATTHEWS

DEC - 1 2021

## **COVER LETTER**

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TO:	<b>Registration Section</b>
	Division of Corporations

Teadeus, LLC SUBJECT: \_\_\_\_\_

· 1

Name of Limited Liability Company

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

**f** ,

Please return all correspondence concerning this matter to the following

Please return all correspo	ondence concerning this matter	to the following:		
	Boris Laboy, CPA			
	Name of Person			
	Firm/Company			
	20939 N Dogwood Street	Tunicompany		
		Address		
	Deerfield, IL 60015			
City/State and Zip Code				
boris_cpa@yahoo.com				
	E-mail address: (	to be used for future annual report notification	n)	
For further information c	concerning this matter, please c	all:		
Boris Labov, CPA		847 215-0644 at ()		
Name of Person		Area Code Daytime Tele	phone Number	
Enclosed is a check for t	he following amount:			
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Address: Registration Section		Street Address:		
Registration Section Division of Corporations		Registration Section Division of Corporations		
P.O. Box 6327			The Centre of Tallahassee	
Tallahassee, FL 32314			2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

AR		AMENDMENT	
۸РТ	T TICLES OF C	O DRGANIZATION	1
AN		<b>F</b> • •	
	0	21 HOM 15	21 3: 22
Teadeus, LLC		21 557 1 2	
	ited Liability Compa	ny as it now appears on our record- liability Company)	<u>y.)</u>
	(A Florida Limited ]	Liability Company)	_
The Articles of Organization for this Limited I	iability Company	were filed on October 29, 2021	and assigned
-	shoring company	stere med on	
Florida document number	<u> </u>		
This amendment is submitted to amend the fol	lowing:		
A. If amending name, <u>enter the new name</u>	of the limited liab	<u>ility company here</u> :	
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation "LLC"	" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	4425 Gentrice Drive	
(Principal office address MUST BE A STREET ADDRESS)		Valrico, Florida 33596	
		• • •	
		4425 Gentrice Drive	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE	<u>: BOX)</u>	Valrico, Florida 33596	
		<u> </u>	<u> </u>
B. If amending the registered agent and/or		address on our records, <u>enter</u>	the name of the new registere
agent and/or the new registered office addr	<u>ess here</u> :		
Name of New Registered Agent:	Anna Tcebekov	/a	
New Registered Office Address:	4425 Gentrice	Drive	
New Registered Office Address.		Enter Florida street address	<u>,</u>
	Valrico		orida <u>33596</u>
		, <b>r</b> 10 , 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

ŀ 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 = M $AMBR = A$	fanager Authorized Member	Address 21 15 15 51 3: 22	
<u>Title</u>	Name	Address 21 50	<b>Type of Action</b>
MGR	Anna Tcebekova	4425 Gentrice Drive	<b>≣</b> ∧dd
		Valrico, Florida 33596	🗆 Remove
			Change
AMBR	Oleksandr Prudskyi	5902 Memorial Highway	🗆 Add
		Building 10, Unit 1002	■Remove
		Tampa, FI 33615	□Change
			🗆 Add
			Change
	······		🖸 Add
			🗆 Remove
			🗆 Change
			🗆 Add
			🗆 Remove
			🗆 Change
	<u></u>		🗆 Add
			Change

## **D.** If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

			21 HOT 15 F1 3: 22	2
			21	
		······································	<u> </u>	
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	<u></u>			·····
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		· · · · · · · · · · · · · · · · · · ·		
(If an e <u>Note</u> :	tive date, if other than the dat flective date is listed, the date must be $\frac{1}{2}$ . If the date inserted in this block ment's effective date on the Depar	specific and cannot be prior to date of tilir does not meet the applicable statutor	g or more than 90 days after filing. y filing requirements, this date	) Pursuant to 605.0207 (3)(b)
If the record is f		te, but not an effective time, at 12:01	a.m. on the carlier of: (b) 11	e 90th day after the
Data	November 8 1	2021		
Datet	4 <u></u>			

Alest /

Signature of a member or authorized representative of a member

Anna Tcebekova

Typed or printed name of signee

Filing Fee: \$25.00