## L21000502348

(Requestor's Name)
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, ,
(City/State/Zip/Phone #)
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## COVER LETTER

	vision of Corp					
eun iret.	FREESTYLE EXPORT LLC					
SUBJECT:		Name of Lim	nited Liability Company			
The analoga	ed Amialag of	Amendment and fee(s) are sub	amitted for filing			
Please retur	n all correspo	ndence concerning this matter	to the following:			
		TATYANA POLANSK				
			Name of Person			
		FREESTYLE EXPORT L	LC			
			Firm/Company			
		3100 STEEL RAIL DR U	A			
			Address			
		BUNNELL, FL 32110				
			City/State and Zip Code			
		PROMPTTAX@GMAIL.C	сом			
		E-mail address: (	(to be used for future annual report notification)			
For further	information co	oncerning this matter, please c	all:			
TATYANA	POLANSK		386 503-7721			
Name of Person		Person	Area Code Daytime Telephone Number			
Enclosed is	a check for th	e following amount:				
□ \$25.00	Filing Fcc	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee Certified Copy Certificate of Status & Certified Gopy (additional copy is enclosed)			
	ailing Address		Street Address: Registration Section Division of Corporations			
Registration Section Division of Corporations			Division of Corporations			
	O. Box 632	•	The Centre of Tallahassee			
Ta	llahassee, F	TL 32314	2415 N. Monroe Street, Suite 810			
			Tallahassee, FL 32303			

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FREESTYLE EXPORT LLC		
(Name of the Limited Liability Con (A Florida Limit	npany as it now appears on our records.) ed Liability Company)	
The Articles of Organization for this Limited Liability Compa Florida document number <u>L21000502348</u> .	11 /2 /2	2] and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	ability company here:	
The new name must be distinguishable and contain the words "Limited Li	ability Company," the designation "LLC" or th	e 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 and/or the new registered office address here:	ce address on our records, enter the n	ame of the new regist
Name of New Registered Agent:		<u> </u>
New Registered Office Address:	Enter Florida street address	6 P
	. Florida	inter E
<del></del>	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 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>	<u>Address</u>	Type of Action
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		FL 32137	= Remove
			□Change
MGR	VADIM GOR	10 BOULDER ROCK DR PALM COAST FL 3213	7 <b>∃</b> Add
			□Remove
			□Change
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			□Remove
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f an effective date is <b>Note:</b> If the date is	other than the date listed, the date must be sp userted in this block do we date on the Departn	ecific and cannot boses not meet the	e prior to date of fili applicable statutor		s after filing.) Pursuar	
record specifies a d is filed.	i delayed effective date	, but not an effec	ctive time, at 12:01	a.m. on the earlier	of: (b) The 90th d	ay after the
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		11/1/				
rated <u>C</u>			5012	<b>,</b>		
Dated <u>Se</u>	Signal	tule of a member of	or authorized represe	ntative of a member		