

L220000757

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H22000269533 3)))



H22000269533ABC%

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305)552-5973
Fax Number : (305)675-5944

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MAGAZINOV LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

2022 AUG 10 AM 11:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2022 AUG 10 PM 3:27

APPROVED
AND
FILED

Electronic Filing Menu

Corporate Filing Menu

Help

AUG 11 2022
K. Brumley

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MAGAZINOV 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 12/22/2021 and assigned Florida document number L22000000757.

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:

351 NW 82ND AVE APT 1109

(Principal office address MUST BE A STREET ADDRESS)

MIAMI, FL 33126-8347

Enter new mailing address, if applicable:

351 NW 82ND AVE APT 1109

(Mailing address MAY BE A POST OFFICE BOX)

MIAMI, FL 33126-8347

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:

ORLANDO GARSIA MAGAZINOV

New Registered Office Address:

351 NW 82ND AVE APT 1109

Enter Florida street address

MIAMI

Florida

City

33126-8347

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.

Orlando Garsia Magazinov
If Changing Registered Agent, Signature of New Registered Agent

APPROVED
AND
FILED
2022 AUG 10 PM 5:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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>	<u>Type of Action</u>
AMBR	ORLANDO GARSIYA MAGAZINOV	351 NW 82ND AVE APT 1109	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33126-8347	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	ORLANDO GARSIYA MAGAZINOV	16422 NW 82ND PL	<input type="checkbox"/> Add
		MIAMI, FL 33016	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

E. Effective date, if other than the date of filing: 08/09/2022 (optional)
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated AUGUST 9 2022

Orlando Garcia Magarinos

Signature of a member or authorized representative of a member

ORLANDO GARSTYA MAGAZINOV

Typed or printed name of signee

Filing Fee: \$25.00