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(Re	questor's Name)	
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(Cit	y/State/Zip/Phone #)
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Certified Copies	_ Certificates of	f Status
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Y. SCOTT FEB - 1 2022

COVER LETTER

TO: Registration Section Division of Corporations

• •

SUBJECT: _____

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MARINA PALMS BOAT SLIP 56 LLC

Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

OLGA KALYANOVA

		Name of Person	<u>-</u>	-	
	THE FINKELSHTEYN C	GROUP P.A.		2022 SEC	
	Firm/Company			2022 JAN 24 SECRETAR TALLAHA	<u> </u>
	134 S DIXIE HWY., SUI	FE 201		HAN 24	
		Address	·		m
	HALLANDALE FL 3300	9		PH 3: 02 OF STATE SEE. FL	D
		City/State and Zip Code			
	olga@tfgcpa.com				
	E-mail address: (to be used for future annual report noti	fication)		
For further information co	oncerning this matter, please e	all:			
OLGA K/	ALYANOVA	305 931 9212 at ()			
Name of Person			e Telephone Number	 r	
Enclosed is a check for th	e following amount:				
■ \$25.00 Filing Fee	☐ \$30,00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	ne of Status &	
					

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

The Articles of Organization for this Limited Liability Company were filed on <u>12/28/2021</u> and Florida document number <u>L22000005066</u> . This amendment is submitted to amend the following: A. If amending name, <u>enter the new name of the limited liability company here</u>:	lassignee
A. If amending name, <u>enter the new name of the limited liability company here</u> :	
MARINA PALMS BOAT SLIP 56 LLC	
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the alogevia) "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS) BAL HARBOR FL 33154	
Enter new mailing address, if applicable:	D

	City	Florida Zip Code	
New Registered Office Address:	Enter Florida su	eet address	
Name of New Registered Agent:			

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

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If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> being added <u>or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

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<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	KUDRINAS, MANTAS	3370 NE 190TH STREET, #714 MIAMI, FL 33180	DAdd
			Remove
			□Change
MGR. AMBR	VLADIMIR MOROZOV	10203 COLLINS AVE., UNIT 602N	≣ ∆dd
		BAL HARBOR, FL 33154	
		AHASSEE,	
			۲۲ ۲ س∧⊡بی ۵۵
		<u>اِس</u>	⇔ □Remove
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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		SECHETAN 24 PM 3:03 TAILLAHASSEE, FL
	<u>.</u>	

E. Effective date, if other than the date of filing: ______(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	JANUARY 20th 2022	
	BLL	
	Signature of a member or authorized representative of a member	
	VLADIMIR MOROZOV	MGR, AMBR
	Typed or printed name of signee	

Filing Fee: \$25.00