

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet
L2200041310

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To: Division of Corporations
Fax Number : (350)617-6383

From: Account Name : MIACCOUNTING CO
Account Number : I20220000131
Phone : (305)610-2704
Fax Number : (305)647-6040

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

Email Address: info@miaccounting.us

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

Certificate of Status	0
Certified Copy	0
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2022 AUG 2 21:59:13

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Corporate Filing Menu

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2022 AUG -2 PM 3:14

APPROVED
AND
FILED

AUG 02 2022
K. Brumby

COVER LETTER

(((H22000259318 3)))

TO: Registration Section
Division of Corporations

SUBJECT: FOMD 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:

EGOR ZHAROV

Name of Person

FOMD LLC

Firm/Company

800 SE 4TH AVE STE 705

Address

HALLANDALE BEACH, FL 33009

City/State and Zip Code

info@miaccounting.us

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Egor Zharov

Name of Person

at (305) 610 2704

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

\$25.00 Filing Fee

\$30.00 Filing Fee &
Certificate of Status

\$55.00 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

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(((H22000259318 3)))

FOMD L.L.C

(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 01/25/2022 and assigned Florida document number L22000044310

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:

Enter Florida street address

Florida

City

SECRETARY OF STATE MAILING SERVICES DIVISION 2022 AUG -2 PM 3:14

FILED

APPROVED AND

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, enter the title, name, and address of each person being added or removed from our records:

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MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
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AMBR	KIRILL MIKHAILOV	8446 GARDENS CIR APT 8	<input checked="" type="checkbox"/> Add
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