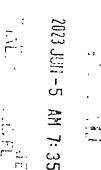
122000046576

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:



300409997543

05/05/23--01016--014 **30.00



Office Use Only

y 7/21/2023

COVER LETTER

	gistration Se vision of Cor			
SHD HCT.	VALKNUT			
SUBJECT		Name of Lim	ited Liability Company	_
The encloses	d Articles of .	Amendment and fee(s) are sub	mitted for tiling.	
Please return	1 all correspo	ndence concerning this matter	to the following:	
		VOLODYMYR SOLODO	VNIK	
			Name of Person	
		VALKNUT LLC		
			Firm/Company	
		1390 BAY HARBOR DR.	APT. 102	
			Address	
		PALM HARBOR, FL 346	35	
			City/State and Zip Code	
		solodovnikua88@gmail.cor E-mail address: (to be used for future annual report notification)	
For further i	nformation c	oncerning this matter, please c	all:	
VOLODYN	1YR SOLOD	OVNIK	412 520-5074	
	Name of	f Person	at () Area Code Daytime Telephone No	ımber
Enclosed is	a check for th	ne following amount:		
☐ \$25.00 l	Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	Certified Copy Cer (additional copy is enclosed) Cer	00 Filing Fee, tificate of Status & tified Copy itional copy is enclosed)
Re	illing Addres	Section	Street Address: Registration Section	
Division of Corporations P.O. Box 6327			Division of Corporations The Centre of Tallahassee	
	llahassee, I		2415 N. Monroe Street, Su Tallahassee, FL 32303	ite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



2023 JUH - 5 AM 7: 35

VALKNUT LLC		
(<u>Name of the Limited Liability Compar</u> (A Florida Limited L	iy as it now appears on our records.) ability Company)	TALL SEEFE
The Articles of Organization for this Limited Liability Company Florida document number L22000046576	were filed on 01/26/2022	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
-	ty Company," the designation "LLC" o	or the abbreviation "L.L.C."
•	ty Company," the designation "LLC" o	or the abbreviation "L,L.C."
Enter new principal offices address, if applicable:	ty Company," the designation "LLC" o	
Enter new principal offices address, if applicable:	-	
Enter new principal offices address, if applicable:	-	
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	-	
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable:	-	
The new name must be distinguishable and contain the words "Limited Liabili 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)	-	

New Registered Agent's Signature, if changing Registered Agent:

Name of New Registered Agent:

New Registered Office Address:

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

Enter Florida street address

_, Florida

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

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	MARYNA SOLODOVNIK	1390 BAY HARBOR DR, APT. 102	= Add
		PALM HARBOR, FL 34685	□Remove
			□Change
			□Add
			□Remove
			☐ Change
			🗆 Add
			□Remove
			Change
			□Add
			□Remove
			□ Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			□ Change

						
						
 		 				
						·
				_		
				-		
	<u>.</u>					
10.00			-		*	
				<u> </u>	·	
, , <u>, , , , , , , , , , , , , , , , , </u>						
						
•						
Effective date, if other than t fan effective date is listed, the date r Note: If the date inserted in this	must be specific at block does not	nd cannot be prior t . meet the applica	o date of filing or	more than 90 days	optional) after filing.) Pursuar , this date will not	nt to 605.0207 (be listed as t
document's effective date on the	Department of	State's records.				
record specifies a delayed effect d is filed.	tive date, but no	ot an effective tin	ne, at 12:01 a.m	on the earlier o	f: (b) The 90th d	lay after the
Dated MAY 26		2023	,			
,/aicd						
			\/_//			

Filing Fee: \$25.00

Typed or printed name of signee