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COVER LETTER

TO:

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Registration Section Division of Corporations

Tallahassee, FL 32314

Anuc Service SUBJECT:	ces LLC		
SUBJECT.	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Yelena Anuchina		
		Name of Person	
		Firm/Company	
	5557 Jacaranda Ave		
		Address	
	North Port, FL 34291		
		City/State and Zip Code	
	anuc77@gmail.com	to be used for future annual report	notification
For further information c	oncerning this matter, please c		
Yelena Anuchina	Name of Person Area Code Daytime Telephone Number		
Name o	f Person	Area Code Day	rtime Telephone Number
Enclosed is a check for t	he following amount:		
≘ \$25.00 Filing Fee	S30.00 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 Addres		Street Address Registration	<u>s</u> Section
Registration Division of C		Division of Corporations	
P.O. Box 632		The Centre of Taliahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2023 1:09 17 7:17:23

Anuc Services 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 Con- Florida document number <u>1.22000108120</u>		on <u>03/02/2022</u>	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limite	ed liability compa	ny here:	
The new name must be distinguishable and contain the words "Limited	d Liability Company,	" the designation "LLC" or the	e abbreviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRE	<u></u>		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BON)	.		
imaning maness inversely over over the rowsy	<u></u>		
B. If amending the registered agent and/or registered of agent and/or the new registered office address here: Name of New Registered Agent:		our records, <u>enter the n</u>	
New Registered Office Address:			
	Enter Florida street address		
	City	Florida	Zin Code
New Registered Agent's Signature, if changing Registered a	•		zap Couc
I hereby accept the appointment as registered agent an provisions of all statutes relative to the proper and con accept the obligations of my position as registered age being filed to merely reflect a change in the registered company has been notified in writing of this change.	nd agree to act in uplete performan unt as provided fo	nce of my duties, and La or in Chapter 605, F.S. (m familiar with and Or, if this document is
	If Changing Registe	red Agent, Signature of New	Registered Agent

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>	Address	Type of Action
MGR	Pavel Anuchin	5 557 Jacaranda Ave	■Add
		North Port, FL 34291	□Remove
			□Change
			□Add
			Remove
		□ Change	
			□Add
			□Remove
			□ Change
			□Add
			□Remove
			□Change
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			□Remove

_____ □ Change

	-
Effec	tive date, if other than the date of filing:
If an et Note:	ffective 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 605.020. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as
docui	nent's effective date on the Department of State's records.
	The DOTA day of or the
re reco ord is f	rd 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 filed.
	11/14/23 1
Datec	
	SH4
	Signature of a member or authorized representative of a member
	Yelena Anuchina

Filing Fee: \$25.00