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CLERK OF THE
COURT

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: POLO OLYMPIC CLUB 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:

Anthony Barbuto, Esq.

Name of Person

Barbuto Law Firm, P.A.

Firm/Company

12773 W. Forest Hill Blvd., Suite 101

Address

Wellington, FL 33414

City/State and Zip Code

abarbuto@barbutolaw.com

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

For further information concerning this matter, please call:

Anthony Barbuto, Esq.

561 798-2907
at ()

Name of Person

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

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

POLO OLYMPIC CLUB 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 03/28/2022 and assigned
Florida document number L22000149580

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Rinchari Polo LLC

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)

12773 W. Forest Hill Blvd.

Suite 101

Wellington, FL 33414

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

12773 W. Forest Hill Blvd.

Suite 101

Wellington, FL 33414

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:

Anthony Barbuto, Esq.

New Registered Office Address:

12773 W. Forest Hill Blvd., Suite 101

Enter Florida street address

Wellington

Florida 33414

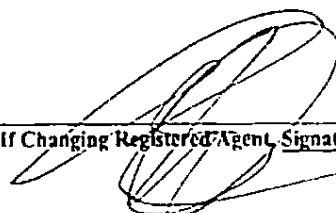
City

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.

If Changing Registered Agent, Signature of New Registered Agent



FILED
2022 OCT - 3 3 2022
STATE OF FLORIDA
CLERK OF THE CIRCUIT COURT
IN AND FOR THE COUNTY OF PALM BEACH

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	Welker, Hope G	3355 Santa Barbara Drive	<input type="checkbox"/> Add
		Wellington, FL 33414	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AR	Dominique, Shuminov C	36 Maple Ave	<input type="checkbox"/> Add
		Millbrook, NY 12545	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AR	Shuminov, Dominique C	PO Box 1197	<input checked="" type="checkbox"/> Add
		Millbrook, NY 12545	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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SUBMITTER
H. A. ASSESSMENT

2022 OCT -3 PM 2:51

(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)

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 September 27, 2022

20

Signature of a member or authorized representative of a member

Dominique C. Shuminov (a/k/a Shuminov, Dominique C)

Typed or printed name of signee

Filing Fee: \$25.00