422000180001

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





600395093896

09/30/22--01008--027 **25.00

2027 SEP 30 AM 9: 49

FILED
SECRETARY OF STATE
SECRETARY OF STATE

COVER LETTER

. •

Registration Section

TO:

Division of Cor	rporations		
GOLD PAI	LM REALTY GROUP ELC		
SUBJECT:	Name of Lim	red Liability Company	
The enclosed Articles of	Amendment and fec(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	PAVEL LITVINOV		
		Name of Person	
	GOLD PALM REALTY O		
		"r m? ompany	
	915 W 18 Street		
		Address	
	HIALEAH, FL 33010		
		City. State and Zip Code	
	PAVEL@GOLDPALMRE E-mail address (COM to be used for future annual report not	tification)
For further information of	oncerning this matter, please c		
PAVEL LITVINOV		305 029-3332	
Name o	of Person	at ()	ne Telephone Number
Enclosed is a check for t	he 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	Street Address: Registration Se	
Division of C P.O. Box 632		Division of Co The Centre of	
Tallahassee,	FL 32314	2415 N. Monro	pe Street, Suite 810

Tallahassee, FL 32303

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

GOLD PALM REALTY GROUP LLC		
(<u>Name of the Limited Liab</u> (A Flor	ility Company as it now appears on our ida Limited Liability Company)	records.)
The Articles of Organization for this Limited Liability Florida document number <u>L22000180001</u>	Company were filed on 4/14/2022	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the li	mited liability company here:	
GOLD PALM REALTY LLC		
The new name must be distinguishable and contain the words "L	imited Liability Company," the designatio	n "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADI	ORESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or register	rad affice address on our royards	enter the name of the new registers.
agent and/or the new registered office address here		enter the name of the new registeree
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street	address
		Florida
	City	Florida 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

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
			□Add
			□Remove
			□Change
			□Add
			□Remove
			[]Change
			□Remove
			[]Change
			JRemove
			□Change
			□Add
			[]Remove
			Il Change
			□Remove
			~~1. u

			
		<u> </u>	
	·		
-			
			<u> </u>
-			
		. <u></u>	
Effective date, if	other than the date of filing:		(optional)
(If an effective date is :	listed, the date must be specific and cannot be pri nserted in this block does not meet the appl	or to date of filing or more than 90 da	ys after filing.) Pursuant to 605.0207 (3
	ve date on the Department of State's record		its, this date will not be fisted as th
he record specifies a	delayed effective date, but not an effective	time, at 12:01 a.m. on the earlier	r of: (b) The 90th day after the
ord is filed.			
2220223404	PD 27		
Dated SEPTEMBI	ER 26 2022		
	11/1/	•	
	Signature of a member of an	thorized representative of a member	
		and the sepremental of a member	
PAVEL	LITVINOV - MGRIM		
	Typed or pri	nted name of signee	

Filing Fee: \$25.00