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(Re	questor's Name)	
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(Cit	y/State/Zip/Phone	e #)
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(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE

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FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302

155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

07/19/22

NAME: 1255 NE 110 LLC

TYPE OF FILING: AMENDMENT

COST:

25.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

TO: Registration S Division of Co			
- 1255 NE 1 SUBJECT:	10 LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	ANDREW SHOLOMOV	псн	
		Name of Person	
	1255 NE 110 LLC		
		Firm/Company	
	9499 COLLINS AVEUNI	Т 911	
		Address	
	SURFSIDE, FL 33154		
		City/State and Zip Code	
	wmcclean2022@gmail.com		
For further information c	oncerning this matter, please c	to be used for future annual report no all:	duication
ANDREW SHOLOMOV	VICH .	530 3682284	
Name o	f Person	at () Area Code Dayti	me Telephone Number
Enclosed is a check for the	ne 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)
<u>Malling Addres</u> Registration S		Street Address: Registration S	ection
Division of C	corporations	Division of Co	
P.O. Box 632 Tallahassee, I		The Centre of	Tallahassee oe Street, Suite 810
rananassee, i	J_J, _ T	717 14. MINIT	or anorth anne and

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2022 JUL 19 AM 9: 35

1255 NE 110 LLC

C SECRETARY OF SIMUS (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 L Florida document number LS22000188537	iability Company	were filed on May 05, 202	2 and assigned
This amendment is submitted to amend the following	owing:		
A. If amending name, enter the new name of	f the limited liabi	lity company here:	
The new name must be distinguishable and contain the w	ords "Limited Liabili	ty Company," the designation "	'LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applic	able:		
(Principal office address MUST BE A STREE	T ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE) B. If amending the registered agent and/or ragent and/or the new registered office address	egistered office a	ddress on our records, <u>en</u>	iter the name of the new registered
Name of New Registered Agent:	ILYA BEZRUK	ІКН	
New Registered Office Address:	9499 COLLINS	AVEUNIT 911	
		Enter Florida street ad	dress
	SURFSIDE		, Florida ³³¹⁵⁴
	-	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

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>	Type of Action
MGR	ANDREW SHOLOMOVICH,	5688 FLINT RD.	□Add
		COCOA, FL 32927	■Remove
		5688 FLINT RD	□ Change
MGR	WILLIAM MCCLEAN	COCOA, FL 32927	■Add
			□Remove
			□ Change
			-
			□Remove
			Change
			□Remove
			Change
			□Add
			□Remove
			Change
	<u> </u>		
			□ Remove
			□ Change

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ffective	date, if other than the date of filing:		
an effecti	e date is listed, the date must be specific and cannot	the prior to data of filing as were the OO L	optional) after filing.) Pursuant to 605 020
	se date inserted in this block does not meet the seffective date on the Department of State's	IC ADDITCADIC STATISTORY TRIPO requirements	, this date will not be listed as
	some date on the Department of State 3	records.	
racord e	soifer a deleved off size to the second		
is filed.	ecifies a delayed effective date, but not an eff	fective time, at 12:01 a.m. on the earlier of	f: (b) The 90th day after the
	Á		
ated 07/	3/22		
	1	<u> </u>	
	Hin		
	Signature of amembe	r or authorized representative of a member	
	Andrew Sholomovich		

Filing Fee: \$25.00