13056476040

From: MADINA bahretdinova

9/21/22, 5:07 PM

Division of Corporations

Florida Department of State

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Account Number : I20220000131

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Fax Number : (305)647-6040

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN RESHKIN LLC

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To: DIVISION OF CORPORATIONS	Page; 5 of 8	2022-09-21 21:1	6:41 GMT	13056476040	From: MADINA
	CO	VER LETT	ER		(((H22000327892 3)))
TO: Registration Section Division of Corpo		} ***	_ ,	. te	•
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RESHKIN LE SUBJECT:					
	Name of Limited I	Liability Company			
The enclosed Articles of Ar	nendment and fec(s) are submitte	ed for filing.			
Please return all correspond	ence concerning this matter to th	e following:			
	TIMUR RESHKIN	:			
		Name of Person			
	RESHKIN LLC				
		Firm/Company		,	•
	800 SE 4TH AVE , APT 711				
		Address			
	HALLANDALE BEACH, FL	33009			
	C	ity/State and Zip Co	ode		•
	info@miaccounting.us				
	E-mail address: (to be	ușed for future anr	mal report notif	ication)	
For further information con	cerning this matter, please call:				
TIMUR RESHKIN		305 • at ()	610-2704		
Name of P	rrson	Area Code	Daytime	Telephone Number	•
		;			
Enclosed is a check for the	ollowing amount:	•			
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	555.00 Filing F Certified Copy (additional copy i	;	Certified	te of Status &
		:			
<u>Mailing Address:</u> Registration Se			t <u>Address:</u> istration Sec	ction	
Division of Con	porations	Divi	sion of Corp	porations	
P.O. Box 6327 Tallahassee, FI	1		Centre of T	allahassee e Street, Suite 8	310
rananassee, Fr	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		ahassee, FL		,,,,

From: MADINA bahretdinova

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13056476040

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

(((H22000327892 3)))

RESHKIN	LLC	•	
	(Name of the Limited Liability (A Florida I	Company as it now unpears on our records.) limited Liability Company)	
The Articles of Organizat	1 22000204026	mpany were filed on <u>09/08/2022</u>	and assigned
This amendment is submi	ated to amend the following:		
A. If amending name, e	nter the new name of the limit	ed liability company here:	
The new name must be disting	rishable and contain the words "Limit	ed Liability Company," the designation "LLC" or the abb	reviation "L.L.C."
Enter new principal offi	res address, if applicable:	·	
(Principal office address	MUST BE A STREET ADDRI	ESSS)	
Enter new mailing addr	ess, if applicable:		SECRE SALLAH
(Mailing address MAY I	E A POST OFFICE BOX)		7 2 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
agent and/or the new re	eistered office address here:	office address on our records, enter the name	of the new registered
Name of New R	egistered Agent:		
New Registered	Office Address:	Enter Florida street address	
		, Florida	
		City	Zip Code
New Registered Agent's S	gnature, if changing Registered	Agent:	
provisions of all statute accept the obligations of being filed to merely re	relative to the proper and co my position as registered ag	nd agree to act in this capacity. I further agr mplete performance of my duties, and I am fo ent as provided for in Chapter 605, F.S. Or, i I office address, I herehy confirm that the lim	nmiliar with and If this document is
		H Changing Registered Agent, Signature of New Regi	stered Agent
			(((H22000327892 3)))

If amending or removed	Authorized Person(s) authorized from our records:	to manage, enter the title, name, and address of	each person being added
		!	((((1122000327892 3)))
MGR = M $AMBR = A$	anager uthorized Member		
Title	<u>Name</u>	Address	Type of Action
MGR	ALEKSANDR RESHKIN	5930 SUNRISE VISTA DR, APT 176	
		CITRUS HTS, CA 95610	□Remove
			□Change
			DAdd
			□Remove
			□Change
			□Add
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		i	☐ Change
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		**************************************	□Remove
			Change
			□Add
			Remove
			□Change (((H22000327892 3)))

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		;	(((H22000327892 3)))
D. If amo	ending any oth	r information, enter change(s) here	e: (Attach additional sheets, if necessary.)
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II Person	ina data Bath	withing the dute of filings	(optional)
Note:	If the date insert	the date must be specific and cannot be priored in this block does not meet the applicate on the Department of State's records	to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) table statutory filing requirements, this date will not be listed as the
If the record record is fi		yed effective date, but not an effective t	ime, at 12:01 a.m. on the earlier of: (b) The 90th day after the
	SEPTEMBER 3	1 2022	
Dated	JULI LAIDLY :	7	·
		That	
			orized representative of a member
	TIMUR RE		ted name of signee
			(((1122000327892 3)))

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2022-09-21 21:16:41 GMT

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