

L22 000 438 152

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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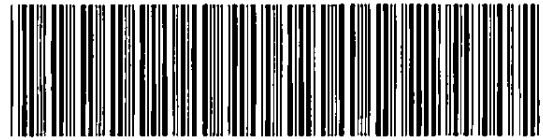
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BEN ENGINEERING 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:

BIRKA, LILIA

Name of Person

BEN ENGINEERING LLC

Firm/Company

4 NORTH FEDERAL HWY #PH 849

Address

DANIA BEACH FL 33004

City/State and Zip Code

GOLDMANLENA000@GMAIL.COM

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

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TALLAHASSEE, FL

For further information concerning this matter, please call:

BIRKA, LILIA

305 300-3708

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**

BEN ENGINEERING 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 10/11/2022 and assigned
Florida document number 1.22000438152

This amendment is submitted to amend the following:

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

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)

4 NORTH FEDERAL HWY APT. PH1849

DANIA BEACH

FL 33004

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

4 NORTH FEDERAL HWY APT. PH1849

DANIA BEACH

FL 33004

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:

BIRKA, LILLIA

New Registered Office Address:

4 NORTH FEDERAL HWY APT. PH1849

Enter Florida street address

DANIA BEACH

City

Florida 33004

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.

Birka, Lillia
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>	<u>Type of Action</u>
MGRM	SANATULLOVA, LILIA	210 174TH STREET APT.312	<input type="checkbox"/> Add
		SUNNY ISLES BEACH	<input type="checkbox"/> Remove
		FL 33160	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

2008 APR 1 AM 11:33
SECRETARY OF STATE
TALLAMOUNT, FL

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

PLEASE, I EXCHANGE LAST NAME FOR SANATULLOVA, LILIIA ON NEW LAST NAME AFTER

MARRIGE ON BIRKA, LILIIA

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ALLAH SEIT

E. Effective date, if other than the date of filing: 03/29/2024 **(optional)**

(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)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 MARCH,28 2024

Birka, Liliia

Signature of a member or authorized representative of a member

Birka Liliia

Typed or printed name of signee