

11/7/24, 3:07 PM

Division of Corporations

Florida Department of State
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Electronic Filing Cover Sheet

L22000451390

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((H24000371760 3))



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TALLAHASSEE, FLORIDA

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ANTIM LLC

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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K. SALY

NOV 12 2024

COVER LETTER

((H24000371760 3))

TO: Registration Section
Division of Corporations

SUBJECT: ANTIM 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:

Andrey Timchenko

Name of Person

ANTIM LLC

Firm/Company

1111 lincoln rd

Address

miami beach, FL 33139

City/State and Zip Code

info@miaccounting.us

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

For further information concerning this matter, please call:

Andrey Timchenko

305 610 - 2704

Name of Person

at ()

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

((H24000371760 3))

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

((H24000371760 3)))

ANTIM LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 10/19/2022 and assigned
Florida document number L22000451390

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)

1111 LINCOLN RD STE 500

MIAMI BEACH, FL 33139

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1111 LINCOLN RD STE 500

MIAMI BEACH, FL 33139

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: ANDREY TIMCHENKO

New Registered Office Address: 150 S BRYAN RD APT 105

Enter Florida street address

DANIA BEACH, Florida 33004

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

((I124000371760 3)))

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records: (((H24000371760 3)))

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	MARIIA TIMCHENKO	150 S BRYAN RD APT 105	<input checked="" type="checkbox"/> Add
		DANIA BEACH, FL 33004	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	ANDREY TIMCHIENKO	150 S BRYAN RD APT 105	<input type="checkbox"/> Add
		DANIA BEACH, FL 33004	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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 TALLAHASSEE COUNTY
 CLERK OF CIRCUIT COURT
 STATE OF FLORIDA

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