L22000482353

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	stration Se sion of Cor				
SUBJECT:	SHARK AU	JTO LLC			
		Name of Lin			
The enclosed a	Articles of a	Amendment and fee(s) are sub	omitted for filing.		
Please return a	all correspo	ndence concerning this matter	to the following:		
		ANATOLII IZGHACHOV	1		
		4.5.	Name of Person		
			Firm/Company		
15455 WESTMINSTER AVE Address					
	CLEARWATER, FL 33760				
		groznuy25555@gmail.com	City/State and Zip Code	ation) 2023 FEB	
		E-mail address: (to be used for future annual report notific	ation)	, case
For further info	ormation co	oncerning this matter, please co	all:		1 {
ANATOLILIZ	ZGHACHO	v	941 233-1852 at()	AH 8: 3일만, H	
	Name of	Person	Area Code Daytime T	Felephone Number [17]	
Enclosed is a c	check for the	e following amount:			
≘ \$25.00 Fil	ling 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 enclose	

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327

Street Address: Registration Section Division of Corporations The Centre of Tallahassee

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SHARK AUTO LLC		
(<u>Name of the Limited Liability Co</u> (A Florida Limi	mpany as it now appears on our re ted Liability Company)	cords.)
The Articles of Organization for this Limited Liability Comp	and assigned	
Florida document number L22000482353		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited l	iability company here:	
The new name must be distinguishable and contain the words "Limited L	iability 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	2	
		70 23 Seco
Enter new mailing address, if applicable:		September 1
Mailing address MAY BE A POST OFFICE BOX)		Sio P III
		17 8 D
		15 A
B. If amending the registered agent and/or registered offi agent and/or the new registered office address here:	ce address on our records, <u>en</u>	ter the name of the new registere
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street ad	ldress
	 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 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>	Address	Type of Action
AMBR	ANATOLII IZGHACHOV	15455 WESTMINISTER AVE APT B	= Add
		CLEARWATER, FL 33760	□Remove
			□ Change
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Effective da	ate, if other than	the date of fil	ling:		g or more than 90 days :	ptional)		
Note: If the	date is listed, the date date inserted in thi effective date on th	is block does no	ot meet the app	licable statutory	or more than 90 days : filing requirements.	atter filmg this date	g.) Pursi e will n	not be li	05.0207 sted as
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