

L22000489423

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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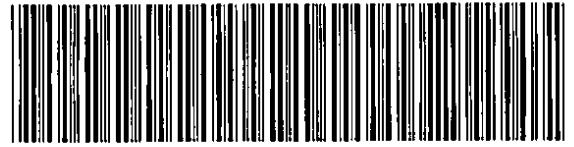
(Business Entity Name)

(Document Number)

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2023 MAY 30 PM 5:01

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COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: B.A. FLOW 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:

YULIYA PAVLUSENKO

Name of Person

Firm/Company

4139 W VINE STREET STE 110

Address

KISSIMMEE FL 34741

City/State and Zip Code

YULIYAFL1973@GMAIL.COM

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

For further information concerning this matter, please call:

YULIYA PAVLUSENKO

Name of Person

407 7294861
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

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

B.A. FLOW 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 11/15/2022 and assigned Florida document number L22000489423.

This amendment is submitted to amend the following:

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

ER FLOW LLC

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)

1965 S OCEAN DR

APT 8B

HALLANDALE BEACH FL 33009

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1965 S OCEAN DR

APT 8B

HALLANDALE BEAH FL 33009

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:

ARTEM KHABAROV

New Registered Office Address:

1965 S OCEAN DR APT 8B

Enter Florida street address

HALLANDALE BEACH

Florida 33009

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>	<u>Type of Action</u>
PRESIDE	ARTEM KHABAROV	1965 S OCEAN DRIVE APT 8B	<input checked="" type="checkbox"/> Add
		HALLANDALE BEACH FL 33009	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
CTO	MYKHAILO MAKHLEVYCH	1100 CLEVELAND STREET APT 408	<input type="checkbox"/> Add
		CLEARWATER FL 33755	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
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			<input type="checkbox"/> Change

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(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)

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 MAY 23 2023

M. Makhlevych
Signature of a member or authorized representative of a member

MYKHAILO MAKHLEVYCH

Typed or printed name of signee

Filing Fee: \$25.00