## TS3 0000 103 Of

(Re	equestor's Name)	<del></del>
(Ad	dress)	<del></del>
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
· ·	,	,
PICK-UP	WAIT	MAIL
(7)		
(Bu	siness Entity Nan	ne)
(D0	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to I	Filing Officer.	
		].

Office Use Only



200403568402

03/01/21 --01011--006 \*\*25.08



## **COVER LETTER**

SUBJECT: Pe	nta Enterta	MMENT LLC ted Liability Company	<u>,                                      </u>
	Name of Limi	ted Liability Company	
The enclosed Articles of .	Amendment and fee(s) are sub-	nitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Kirill	Ole Shkevi'C	
	Penta En	Firm/Company	
	31325 Kirk	shire Ct Wesley Cr	bapec, FL, 33543
	Wester Chap	Oel FL 33543 City/State and Zip Code	
	Ole Shkevick E-mail address: (i	o Kir @ qmail. Co	
	oncerning this matter, please ca		=1
Viril Ole Name o	(h KeViCh Person	at ( <u>813</u> ) <u>328 - 3</u> Area Code Daytime	38-26  Telephone Number
Enclosed is a check for th	_		F 20
X \$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)

TO:

Registration Section Division of Corporations

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

Penta Entert (Name of the Limited Liability C	Company as it now appears on our records.) imited Liability Company)
(A Florida Li	imited Liability Company)
	mpany were filed on January 04, 2023 and assigned
Florida document number <u>L 23000010306</u> .	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited	d liability company here:
The new name must be distinguishable and contain the words "Limited	d 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 ADDRES	SS)
Enter new mailing address, if applicable:	<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)	
	L
B. If amending the registered agent and/or registered o agent and/or the new registered office address here:	office address on our records, <u>enter the name of the new registere</u>
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	Since Tropial Sirect Manager
	, Florida
New Registered Agent's Signature, if changing Registered A	·

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>	Name	Address	Type of Action
AMBR	Kirili Oleshkevich	31325 Kirkshire Ct, Wesley Chapez FL, 33543	<u>∕</u> ⊠Add
			Remove
			□Change
			□Add
			Remove
			Change
			— ₽Add
			□Add □ □ □ Remove
<del></del>			₩
			□Remove
			□Change
			□Add
			□Remove
			Change
			Dbb
			□Remove

<del></del>			_				
			· · · · ·				
· · · · · · · · · · · · · · · · · · ·	<u> </u>						
					<u></u>		
	<u></u>	<u> </u>					
	<del></del>	<u> </u>					
		<del> </del>	<u> </u>				
	<del>-</del>		<del></del>		· · · · · · · · · · · · · · · · · · ·		
<del></del>		<u>-</u>			<u></u>	1/2/2	<u></u>
						rin.	
				<u>-</u>	; 	- <u>-</u> -	
					<u>.</u>	Pii l	<u>.</u> !
					لىن بى	28	
		•					
ective date, if other the effective date is listed, the te: If the date inserted in ument's effective date of	date must be specific n this block does no	and cannot be prion of meet the applic	r to date of filing o cable statutory fi	r more than 90 day	(optional) s after filing. ts. this date	) Pursuan	t to 605.02 be listed
cord specifies a delayed s filed.	effective date, but	not an effective t	ime, at 12:01 a.i	n. on the carlier	of: (b) Th	e 90th d	ay after th
ed <u>Feerya</u>	ry 27	. <u>202:</u>	<u>3</u> .				