L23000035242

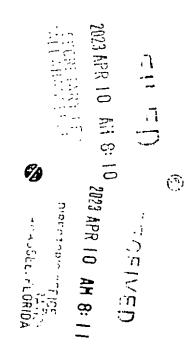
(Ře	equestor's Name)
(Ac	ddress)
(Ac	ddress)
(Ci	ty/State/Zip/Phone #)
PICK-UP	☐ WAIT ☐ MAIL
(Bu	usiness Entity Name)
(Dx	ocument Number)
(5.	,
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:
	J. HORNE
	APR 1 0 2023

Office Use Only



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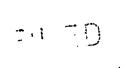
COVER LETTER

ПО: Registration Sec Division of Corp			
E D	01/0 //0		
SUBJECT:	OND LLC Name of Limi	ted Liability Company	
		, , ,	
The enclosed Articles of a	Amendment and fee(s) are sub-	nitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	EVGENII	BONDARENKO Name of Person)
		Name of Person	
	I ROWD I	(0	
	EISONU Z.	Firm/Company	
	10706 Pres	erve Lake Dr	
		Address	
	TOMPA FI	32121	
	17711111111111111111111111111111111111	City/State and Zip Code	
	en hondare	33626 City/State and Zip Code 6 to Opmail o be used for future annual report note	com
	E-mail address: (t	o be used for future annual report not	ification)
For further information co	oncerning this matter, please ca	dl:	
EVEENII B	CONDARENKO	at (<u>727</u>) <u>667</u> Area Code Daytin	· 3506
Name of	Person	Area Code Dayun	ie Telephone Number
Enclosed is a check for th	e following amount:		
S25.00 Filing Fee S25.00 Filing Fee	☐ \$30.00 Filing Fee &	☐ \$55.00 Filing Fee &	□ \$60.00 Filing Fee,
	Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy
		(additional copy to enclosive)	(additional copy is enclosed)
Mailing Address		Street Address:	action
Registration S Division of Co		Registration Se Division of Co	
P.O. Box 632	-	The Centre of T	•
Tallahassee, F	TL 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



0

2023 APR 10 AH 8: 10

EBOND &	1.LC		\$20R[] Ar. 1	
(<u>Name of the Limite</u> (d Liability Compar A Florida Limited L	ny as it now appears on ou iability Company)	r records)	
The Articles of Organization for this Limited Liz	ability Company	were filed on <u>OH/19</u>	9/2023	_ and assigned
This amendment is submitted to amend the follo				
A. If amending name, enter the new name of	the limited liabi	lity company here:		
The new name must be distinguishable and contain the we	rds "Limited Liabili	ity Company," the designation	on "LLC" or the abbre	eviation "L.L.C."
Enter new principal offices address, if applica	ble:			
(Principal office address MUST BE A STREET	(ADDRESS)			
Enter new mailing address, if applicable:				
Mailing address MAY BE A POST OFFICE E	<u>(OX)</u>			
B. If amending the registered agent and/or re agent and/or the new registered office address		ddress on our records	, enter the name	of the new registe
Name of New Registered Agent:		-1-1		
New Registered Office Address:		Enter Florida stree	et address	
		City	, Florida	Zm 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>	Address	Type of Action
AMBR	EUGENII BONDARENA	KO 10706 Preserve Lake Dr	⊠Add
		TAMPA, FL, 33626	□Remove
			□Change
			🗆 Add
			□Remove
			□Change
			□Add
			□Remove
			🗆 Change
*******			DAdd
			□Remove
			□Change
			□Add
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			□Change

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If an effective dat Note: If the da	, if other than the date e is listed, the date must be s te inserted in this block d ective date on the Depart	pecific and cannot be ploes not meet the ap	plicable statutory fi	(option of the contract of the	tiling.) Pursuant to 605.01
e record specified is filed.	es a delayed effective date	e, but not an effecti	ve time, at 12:01 a.i	n, on the earlier of: (b) The 90th day after the
Dated <u>04/</u> 2	10/2023 I	Devet -	,		
	Sign	ature of member or	authorized representat	ive of a member	

Filing Fee: \$25.00