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To:

Division of Corporations

Fax Number : (850)617-6383

From:

9

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Account Name : SORSHER & ASSOCIATES, LLC.

Account Number : 120170000056

Phone : (954)842-2931

Fax Number

: (954)842-2936

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_

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ANTONINA DOLGIKH LLC

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COVER LETTER

Registration Section Division of Corporations TO:

4

SUBJECT:	ANTONIN	A DOLGIKH LLC			
SUBSECT.		Name of Lim	ited Liability Company		
The enclosed	Articles of A	Amendment and fee(s) are sub	mitted for filing.		
Please return a	all correspor	ndence concerning this matter	to the following:		
		DOLGIKH, ANTONINA			
			Name of Person		
		antonina dolgikh i	LC		
	Firm/Company				
		2631 PIERCE ST A			
			Address		
		HOLLYWOOD, FL 33020	0		
		ORGANIZMANNI@GMA	City/State and Zip Cod	de	
		E-mail address: (r	o be used for future annu	ual report notification)
For further info	rmation cor	ncerning this matter, please ca	H:		
DOLGIKH, A	NTONINA		305 at ()	206-1513	
	Name of F	Person	Area Code	Daytime Telepi	none Number
Enclosed is a ch	neck for the	following amount:			
≣ \$ 25.00 Fili		□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fe Certified Copy (additional copy is e		S60.00 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

ANTONINA DOŁGIKH LLC	
(Name of the Limited Liability Company as i (A Florida Limited Liability	t now appears on our records.) y Company)
The Articles of Organization for this Limited Liability Company were	filed on 01/27/2023 and assigned
Florida document number L23000050862	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability c	Ompany here:
The new name must be distinguishable and contain the words "Limited Liability Cor	npany," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
 -	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office address agent and/or the new registered office address here:	s on our records, enter the name of the new registered
Name of New Registered Agent:	
New Registered Office Address:	202
	Enter Florida street address Florida
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 heing 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

Title	Name	Address	Type of Action
AMBR	DOLGIKH, ANTONINA	2631 PIERCE ST A	■Add
		HOLLYWOOD, FL 33020	
			□ Change
			□Add
			□Remove
			□ Change
			□ Remove
			□Change
			□Add
			□Remove
			Change
			□ Add
			□Remove
			□.Add
			□Remove
			□Change

				
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Effective date, if other than the fan effective date is listed, the date mind the late inserted in this bedocument's effective date on the I	e date of filing: ust be specific and cannot be block does not meet the a Department of State's rec-	prior to date of filing o pplicable statutory fi ords.	more than 90 days after fi ling requirements, this	nal) iling.) Pursuant to 605.0207 of date will not be listed as t
e record specifies a delayed effecti d is filed.	ve date, but not an effecti	ive time, at 12:01 a.n	t, on the earlier of: (b)	The 90th day after the
Dated	, 2023	·		
	-T			
_ Se	Signature of a member or			

Filing Fee: \$25.00