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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassbe, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Axis Brickell 3806 LLC	
Please Debit I20000000257 For: 25	
Thank you Seth Neeley	
1.45	A color Pile
- Holy	Art of Inc. File
	LTD Partnership File
	Foreign Corp. File
	L.C. File
	Fictitious Name File
	Trade/Service Mark
	Merger File
	An, of Amend, File
	RA Resignation
	Dissolution / Withdrawal
	Annual Report / Reinstatement
	Cert. Copy
	Photo Copy
	Certificate of Good Standing
	Certificate of Status
	Certificate of Fictitious Name
	Corp Record Search
/ .	Officer Search
	Fictitious Search
Signature	Fictitious Owner Search
Signature //	Vehicle Search
	Driving Record
Requested by:	UCC 1 or 3 File
Name Date Time	UCC 11 Search
name Date Time	UCC 11 Retrieval
Walk-In Will Pick Up	Courier

COVER LETTER

TO:

Registration Section
Division of Corporations

	KELL 3806 LLC		
SUBJECT:	Name of Line	nited Liability Company	-
The enclosed Articles of A	Amendment and fec(s) are sub	omitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	ILANA K. ARTZY, ESQ.		
		Name of Person	
	THE LAW OFFICE OF II	.ANA KALICHMAN-ARTZY, P.	Α.
		Firm/Company	
	19390 COLLINS AVENU	TE, STE. B3	
		Address	
	SUNNY ISLES BEACH,	FL 33160	
		City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·
	dgershf	felol@gmail.cur	J
	B-mail address: (to be used for future annual report not	ification)
For further information co	oncerning this matter, please c	all:	
ILANA K. ARTZY, ESQ	ļ.	305 733-0933	
Name of	Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for th	c following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	(additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration S Division of Co P.O. Box 632' Tallahassee, F	ection orporations 7	Street Address: Registration So Division of Co The Centre of 7 2415 N. Monro	rporations

Tallahassee, FL 32303

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

2022		7)
2023 MAR 30	AH	9: ₀ ,
rds.)		U

AXIS BRICKELL 3806 LLC

(Name of the Limited	A Florida Limited I	iability Company)	on our records.	· ·
The Articles of Organization for this Limited Lia	bility Company	were filed on $\frac{03/1}{2}$	4/2023	and assigned
This amendment is submitted to amend the follow	wing:			
A. If amending name, enter the new name of	the limited liab	ility company he	<u>re</u> :	
The new name must be distinguishable and contain the wo	rds "Limited Liabil	ity Company," the de	signation "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applicable:		18501 COLLINS AVE, APT. 4102		
(Principal office address MUST BE A STREET		SUNNY ISLES	BEACH, FL 33160	
Enter new mailing address, if applicable:		18501 COLLINS	S AVE, APT. 4102	
(Mailing address MAY BE A POST OFFICE BOX)		SUNNY ISLES BEACH, FL 33160		
B. If amending the registered agent and/or re agent and/or the new registered office address Name of New Registered Agent:			cords, <u>enter the name</u>	of the new regis
,	18501 COLLINS AVE, APT. 4102			
New Registered Office Address:	2007 002211		da street address	
	SUNNY ISLES	ВЕАСН	, Florida ³³¹	60
		City	, 11011444	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>	<u>Address</u>	Type of Action
MGR	DMITRIY GERSHFELD	18501 COLLINS AVE, APT. 4102	≣Add
		SUNNY ISLES BEACH, FL 33160	□Remove
			[] Change
MGR	DANNY LEMESHEV	19390 COLLINS AVENUE, STE. B3	□ Add
		SUNNY ISLES BEACH, FL 33160	Remove
			□Change
			[] Add
			Remove
			Change
			□Remove
			Change
			□Add
			Remove
			[] Change
			□ Remove
			□ Change

Page 2 of 3

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
E. Effective date, if other than the date of filing: (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 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records.
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 March 29, 203. Signature of a member or authorized representative of a member Typed or printed name of signee
Typed or printed name of signee

Page 3 of 3

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