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Special Instructions to	Filing Officer:	
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A. RIVERS

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COVER LETTER

TO: Registration Section Division of Corpor			
SUBJECT: A	SHKA CO LU Name of Linu	C . ned Liability Company	
The enclosed Articles of Am	nendment and fee(s) are sub-	mitted for filing.	
Please return all corresponde	ence concerning this matter t	to the following:	
	ZNKA	Zi CHERMAN Name of Person	
	TASHKA	É CO LLC. Firm/Company	
	3755 NE	167th STREET Address	APT 27
-	NORTH MIAH +ashka E-mail address: (1)	MI BEACH FL City/State and Zip Code Cor @ CClou to be used for future annual report noti	33160 d. com
For further information conc	erning this matter, please ca	all:	
ZVIKA Zica	HERMAN	at (<u>862)</u> 335 Area Code Daytim	- 8555 e Telephone Number
Enclosed is a check for the f	ollowing amount:		
□ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	[3] \$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

TASHKACO, LLC.

The Articles of Organization for this Limited Liability Company were filed on ______ and assigned Florida document number L 23000 I 38360 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: 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) 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 on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address City 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>	Name	Address	Type of Action
			□Add
			□Remove
			☐ Change
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ffecti	ve date, if other than the date of filing: (optional)
Note:	ve date, if other than the date of filing:
d ie Gil	I 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 ed.
ated	June 17th 2023
	Signature of a member or authorized representative of a member ZVIKA ZICHERMAN

Filing Fee: \$25.00

Typed or printed name of signee



May 30, 2023

ZVIKA ZICHERMAN 3755 NE 176 ST. SUITE 27 NORTH MIAMI BEACH, FL 33160

SUBJECT: TASHKACO, LLC Ref. Number: L23000138360

We have received your document for TASHKACO, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

If you have any questions concerning the filing of your document, please call (850) 245-6353.

Letter Number: 923A00012263

Alecia Rivers Regulatory Specialist III

www.sunbiz.org