

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : PAGIO'S & ASSOCIATES, LLC
Account Number : I20100000043
Phone : (305)397-8553
Fax Number : (305)397-8521

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

Email Address: Katerina.gerger@icloud.com

SECRETARY OF STATE
TALLAHASSEE, FL

2024 FEB - 1 PM 12:06

FILED

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
KATERINA MAKE UP LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

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DIVISION OF CORPORATIONS
TALLAHASSEE, FL

Jan. 31. 2024 6:50PM

H24000146624F 2

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ~~KATERINA~~MAKE UP LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

KATERINA I. GERGER

Name of Person

KATERINA MAKE UP LLC

Firm/Company

16950 NORTH BAY RD APT 1115

Address

SUNNY ISLES BEACH, FL 33160

City/State and Zip Code

KATERINAGERGER@ICLOUD.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

KATERINA I. GERGER

786

874 - 4143

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$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)

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

Jan. 31. 2024 6:51 PM

H240001464243

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

KATERINA MAKE UP LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 03/24/2023 and assigned
Florida document number L23000149281.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

MERAKI SERVICES USA, LLC

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)

16950 NORTH BAY RD,

16950 N Bay Rd Apt 1115

SUNNY ISLES BEACH, FL 33160

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

16950 NORTH BAY RD,

APT 1115

SUNNY ISLES BEACH, FL 33160

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

Florida

City

FILED
2024 FEB -1 PM 12:06
SECRETARY OF STATE
TALLAHASSEE, FL

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

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H240 No. 146324-3

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>	<u>Type of Action</u>
MGR	GERGER, KATERINA I	16950 NORTH BAY RD,	<input type="checkbox"/> Add
		APT 1115	<input checked="" type="checkbox"/> Remove
		SUNNY ISLES BEACH, FL 33141	<input type="checkbox"/> Change
AMBR	GERGER, KATERINA I	16950 NORTH BAY RD,	<input checked="" type="checkbox"/> Add
		APT 1115	<input type="checkbox"/> Remove
		SUNNY ISLES BEACH, FL 33160	<input type="checkbox"/> Change
AMBR	DETARSIO, FRANCO	16950 NORTH BAY RD,	<input checked="" type="checkbox"/> Add
		APT 1115	<input type="checkbox"/> Remove
		SUNNY ISLES BEACH, FL 33160	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

[illegible]

E. Effective date, if other than the date of filing: _____ (optional)

(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 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the 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 JANUARY 31 2024

KATERINA GERGER
KATERINA GERGER (DOB 21.05.1974 18.05.1977)

Signature of a member or authorized representative of a member

KATERINA I. GERGER

Typed or printed name of signee

Filing Fee: \$25.00