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COVER LETTER

Tallahassee, FL 32314

TO: Registration S Division of Co			
SUBJECT:	RUSSIAN 5	TUDIO LLC	
	Name of Lim	nited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are sub	omitted for filing.	
	ondence concerning this matter		
	<u>MARINA</u>	Same of Person	
	DUCCTAN C		
	RUSSIAN S	Firm/Company	
	2000 E 0A	AKLAND PARK BLVD 103 Address	
	FORT LAUDE	ERDALE FL 33306 City/State and Zip Code	2023
	marina. 9	ladkikh@yahoo.com	1023 AFR 17
For further information	concerning this matter, please c	rail:	7 PN
MARINA	GLADKIKH	at (305) 505 - 0272	PH 12: 39
Name	of Person	Area Code Daytime Telephone Number 173	ψ.
Enclosed is a check for	the following amount:		
☑ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee Certified Copy (additional copy is enclosed) ☐ \$60.00 Filing Fee Certificate of State Certified Copy (additional copy is enclosed)	atus &
Mailing Addre		Street Address:	
Registration	Section Corporations	Registration Section Division of Corporations	
P.O. Box 63		The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CTILL ATAILE

Kassing Simple	
(Name of the Limited Liability Compa (A Florida Limited	any as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L 2300046 2050</u> .	were filed on MARCH 31, 2023 and assigned
his amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	pility company here:
he new name must be distinguishable and contain the words "Limited Liabi	ility 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)	. 83 . 13
	23
Enter new mailing address, if applicable:	i
Mailing address MAY BE A POST OFFICE BOX)	
Maning address MATE BE AT 1031 OF THEE BOAY	—————————————————————————————————————
	——————————————————————————————————————
3. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent:	address on our records, <u>enter the name of the new regis</u>
Name of New Registered Agent.	
New Registered Office Address:	
	Enter Florida street address
	Florida
	City Zip Code

New Registered Agent's Signature, if changing Registered Agent:

DILCCTARL

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
AP	JULIA GLADKIKH	1312 SILK OAK DRIVE	□Add
		HOLLYWOOD, FL 33021	∑ Remove
			□ Change
			□Add
		 	□Remove
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Effective date, if an effective date i Note: If the date document's effec	inserted in	this block d	oes not m	eet the app	licable stat	ming or mo.	re than 90 da requiremen	_(optio ys after t nts. this	filing.) Pu	irsuant to I not be	605.0207 listed as
record specifies d is filed.	a delayed e	ffective date	e, but not :	an effective	e time, at 1.	2:01 a.m. oi	n the earlie	r of: (b)	The 9	0th day a	after the
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Typed or printed name of signee