

L23000 243361

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

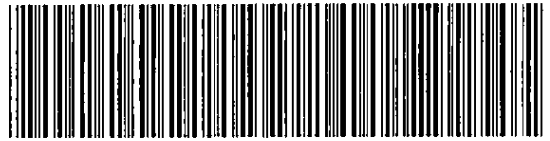
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: XAYYAM CONSULTING 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:

KHAYYAM MUSAYEV

Name of Person

XAYYAM CONSULTING LLC

Firm/Company

7515 FAWN LAKE DR N

Address

JACKSONVILLE, FL 32256

City/State and Zip Code

m.xayyam@gmail.com

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

For further information concerning this matter, please call:

Khayyam Musayev

202

7175757

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

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>	<u>Address</u>	<u>Type of Action</u>
MGR	SULAMITA MUSAEVA	7515 FAWN LAKE DR N	<input type="checkbox"/> Add
		JACKSONVILLE, FL 32256	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	RADA SHIRALIYEVA	7515 FAWN LAKE DR N	<input type="checkbox"/> Add
		JACKSONVILLE, FL 32256	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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[illegible]

(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.

Dated 05/18/2023

Signature of a member or authorized representative of a member

KHAYYAM MUSAYEV
Typed or printed name of signee