L23000300147

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COVER LETTER

TO:			•			
		VE ENTERPRISES, LLC.				
SUBJE	ECT:	Name of Li	mited Liability Company			
The en	closed Articles	Name of Person Area Code Daytime Telephone Number a check for the following amount: Filing Fee \$30.00 Filing Fee & \$55.00 Filing Fee & \$60.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) Street Address:				
Please	return all corre	spondence concerning this matte	er to the following:			
		ALEXANDER EVASKI	S			
			Name of Person			
ASIKSAVE ENTERPRISI			SES LLC			
			Firm/Company			
		878 Tomlinson Terrace				
		-	Address			
		Lake Mary, FL, 32746				
· · · · · · · · · · · · · · · · · · ·						
		- -	: (to be used for future annual report notification)			
For fur	ther informatio	n concerning this matter, please	call:			
ALEX	ANDER EVAS	SKIS				
-	Nan	ne of Person				
Enclose	ed is a check fo	or the following amount:				
■ \$2	5.00 Filing Fee		Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) (additional copy is enclosed)			
	Registration Division o P.O. Box 6	n Section f Corporations	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

ASIKSAVE ENTERPRISES, LLC			
(Name of the Limit	ed Liability Compa (A Florida Limited I	ny as it now appears on our r lability Company)	ecords.)
The Articles of Organization for this Limited L Florida document number L23000300147		were filed on 6/21/2023	and assigned
This amendment is submitted to amend the follo	owing:		
A. If amending name, enter the new name o	f the limited liabi	lity company here:	
The new name must be distinguishable and contain the w	ords "Limited Liabil	ity Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applic	able:		
Principal office address MUST BE A STREE	T ADDRESS)		
Enter new mailing address, if applicable:		****	
(Mailing address MAY BE A POST OFFICE	BOX)		
B. If amending the registered agent and/or ragent and/or the new registered office addre	~	ddress on our records, <u>e</u>	enter the name of the new registered
Name of New Registered Agent:	ALEXANDER	EVASKIS	
New Registered Office Address:	878 Tomlinson	Теггасе	
rew registered office reduces.		Enter Florida street (uddress
	Lake Mary		_, Florida <u>32746</u>
New Registered Agent's Signature, if changing l	Registered Agent:	City	Zip Code
I hereby accept the appointment as registere provisions of all statutes relative to the prop accept the obligations of my position as regi being filed to merely reflect a change in the company has been notified in writing of this	er and complete stered agent as p registered office	performance of my dution provided for in Chapter	I further agree to comply with the es, and I am familiar with and 605, F.S. Or, if this document is

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
			□Remove
			DAdd
			□Remove
			□Change
			□ Change
			Change
		-	□Add
			Add SECRITATION Change
			23 Change
			SSEE, FL
			□Remove

ive date, if other than the date of filing: (optional) fective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) P. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will the continuous date on the Department of State's records.	
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led.	Our day after t
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1/19/2024	M 9: 28
Which a Gradio	' m a
Signature of a member or authorized representative of a member	
Alexander Evaskis	

Filing Fee: \$25.00