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## **COVER LETTER**

	egistration Se ivision of Cor		
SUBJECT	MASTEK	74769 LLC	
SUBJECT	:	Name of Lir	nited Liability Company
The enclos	ed Articles of .	Amendment and fee(s) are sul	bmitted for filing
		ndence concerning this matter	
		EVGENIY RIKOV, CPA	
		<del></del>	Name of Person
		CFO INTERNATIONAL	, LLC
			Firm/Company
		3500 W HALLANDALE	BEACH BLVD
			Address
		HOLLYWOOD, FL 3302	3
		<del></del>	City/State and Zip Code
		EUGENE@CFOINTL.CO	
		E-mail address: (	to be used for future annual report notification)
For further	information co	oncerning this matter, please c	
EVGENIY	RIKOV, CPA		571 314-2515 571 571 571 571 571 571 571 571 571
	Name of	Person	all:  571 314-2515  Area Code Daytime Telephone Number
Enclosed is	a check for the	e 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 Status & Certified Copy (additional copy is enclosed)
Re	ailing Address gistration Sovision of Co	ection	Street Address: Registration Section Division of Corporations
Р.	O. Box 6327		The Centre of Tallahassee
Ta	Hahassee, F	1. 32314	2415 N. Monroe Street, Suite 210

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MASTEK 74769 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 07/20/2023 \_\_\_\_\_ and assigned Florida document number 1,23000343396 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 "LLC." 3500 W HALLANDALE BEACH BLVD Enter new principal offices address, if applicable: STE 125 (Principal office address MUST BE A STREET ADDRESS) HOLLYWOOD, FL 33023 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

## 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.

City

If Changing Registered Agent, Signature of New Registered Agent

. Florida \_

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

Title	<u>Name</u>	Address	Type of Action
AMBR	EVGENIY RIKOV	3500 W Hallandale Beach Blvd, Hollywood, FL 32	6023 ■Add
			□Remove
		<del></del>	□Change
	<del></del>		🗆 🗆 Add
			□Remove
			DChange
			🗆 Add
			🗆 Remove
			🗆 Change
	<del></del>		DAdd
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			□Add
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			□Change
			DAdd
			□Remove
		•	FI Change

rer	10/04/2023
(If an et <u>Note:</u>	tive date, if other than the date of filing:  [Totol 2023]  [Dective 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)  If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the nent's effective date on the Department of State's records.
the reco	rd 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 iled.
Dated	10.4.23
	Signature of a member or authorized representative of a member
	EVGENIY RIKOV, CPA

Filing Fee: \$25.00