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PICK-UP	WAIT	MAIL
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•		COVER LETTER			
TO: Registration Security Division of Con	porations			• :	
SUBJECT:		ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	EVGENIY RIKOV, CPA				
	<del></del>	Name of Person			
	CFO INTERNATIONAL.	LLC			
		Firm/Company			
	3500 W HALLANDALE	BEACH BLVD			
		Address			
	HOLLYWOOD, FL 3302.	3			
		City/State and Zip Code			
	EUGENE@CFOINTL.CO			<i>U</i> №	
		to be used for future annual report noti	fication)	2024 OCT – SEGRETAT TALLAH	
For further information c	oncerning this matter, please ca	all:		- 注: OCT	T ETCA
EVGENIY RIKOV, CPA	٨	571 314-2515 at ()		30.5	112002
Name o	f Person	Area Code Daytim	e Telephone Number	PH 1: 04	
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy radditional copy is enclosed)	Certified	te of Status &	

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

YARO 70564 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 tiled on  $\frac{07/20/2023}{2}$ and assigned Florida document number  $\lfloor 1.23000344175 \rfloor$ 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 169 (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: Ç 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.

Cirv

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	EVGENIY RIKOV	3500 W Hallandale Beach Blvd, Hollywood, FL 3	3023 ■ Add
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	Mari 1/2/22
Effect	ve date, if other than the date of filing:
Note:	ective 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 ent's effective date on the Department of State's records.
e recor rd is til	d 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 ed.
Dated	10.4.23
	Signature of a member or authorized representative of a member

Typed or printed name of signee