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•	COVER LETTER	
TO: Registration Sec Division of Corp	tion	
SUBJECT: HAPPY WO	ODEN CRAFTS 100604 LLC	
	Name of Limited Liability Company	
The enclosed Articles of A	mendment and fee(s) are submitted for filing.	
Please return all correspon	dence concerning this matter to the following:	
	EVGENIY RIKOV, CPA	
	Name of Person	
	CFO INTERNATIONAL, LLC	
	Firm/Company	
	3500 W HALLANDALE BEACH BLVD	
	Address	
	HOLLYWOOD, FL 33023	
	City/State and Zip Code	
	EUGENE@CFOINTL.COM	
	E-mail address: (to be used for future annual report notification)	
For further information cor	cerning this matter, please call:	= 1
EVGENIY RIKOV, CPA	571 314-2515 at ()	 :
Name of F	erson Area Code Daytime Telenhone Number	

■ \$25.00 Filing Fee

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

☐ \$30.00 Filing Fee &

Certificate of Status

Street Address:

☐ \$55.00 Filing Fee &

Certified Copy

(additional copy is enclosed)

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

☐ \$60.00 Filing Fee.

Certified Copy (additional copy is enclosed)

Certificate of Status &

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HAPPY WOODEN CRAFTS 100604 LLC		
(<u>Name of the Limited Liability Comp</u> (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	y were filed on 07/20/2023	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	bility company here:	
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	3500 W HALLANDALE BEACH	BLVD
(Principal office address MUST BE A STREET ADDRESS)	STE 164	
	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	077
agent and/or the new registered office address here:	address on our records, enter the	name of the new register
		ं रे ज
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	·., ω
	. Florid:	

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

Zip Code

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
AMBR	EVGENIY RIKOV	3500 W Hallandale Beach Blvd, Hollywood, FL 33	023 ■ Add
			□Remove
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	ting days 16 calls with 11 to 6 cm; 10/04/2023
ll'an et <u>Note:</u>	tive date, if other than the date of filing: [10/04/2023]
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 fled.
	10-4.23
Dated	
Dated	
Dated	Signature of a mountain of a mountain of
Dated	Signature of a member or authorized representative of a member

Filing Fee: \$25.00