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		ä	COVER LETTER			
TO: R	gistration Sect					
ψ Div	izion di Corbi	orations	•	Ť		
SUBJECT:	FROOTWOO	OD 104575 LLC				
	·	Name of 1.	imited Liability Company			
The enclosed	Articles of A	mendment and fee(s) are si	ubmitted for filing.			
Please return	all correspond	lence concerning this matte	er to the following:			
		EVGENIY RIKOV, CPA	A			
			Name of Person			
		CFO INTERNATIONAL	L. LLC			
			Firm/Company			
		3500 W HALLANDALE	EBEACH BLVD			
			Address			
		HOLLYWOOD, FL 330	23			
		EUGENE@CFOINTL.CO	City/State and Zip Code			
		E-mail address:	(to be used for future annual report notif	ication)	€ 20	3
For further in	formation con-	cerning this matter, please	call:		Z4 Ut	2
EVGENIY F	UKOV, CPA		571 314-2515		5024 000 1202	á n
	Name of P	erson	Area Code Daytime	Telephone Number		
Enclosed is a	check for the t	following amount:				•
■ \$25.00 F	iling Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy radditional copy is enclosed)	Certified C	of Status &	
<u>Mail</u>	ing Address:		Street Address:			

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

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

FROOTWOOD 104575 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	v were filed on -08/14/2023	and assigned
Florida document number 1.23000381128		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC" or th	te abbreviation "L.L.C."
Enter new principal offices address, if applicable:	3500 W HALLANDALE BEACH I	BLVD
(Principal office address MUST BE A STREET ADDRESS)	STE 217	
	HOLLYWOOD, FL 33023	·
		· · · · · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		2
		024
		00 11
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, <u>enter the n</u>	ame of the new registere
agent and/of the new registered office address nere:		
Manus ad Nove De Carrier LA		
Name of New Registered Agent:		
New Registered Office Address:		. U1
	Enter Florida street address	
	Florida	
	City	Zip Code

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.

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 3	
			□Remove
			□Change
			□Add
			🗆 Remove
			🗆 Add
			□Remove
			[] Change
			□Add
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(If an eff Note:	tive date, if other than the date of filing: (optional) (optional)
he recor ord is fil	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
	EVGENIY RIKOV, CPA
	Typed or printed name of signee

Filing Fee: \$25.00