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	(Requestor's Name)	
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PICK-UP	WAIT	MAIL
	(Business Entity Name)	
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Certified Copies	Certificates of	Status
Special Instructions to		
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SUBJECT: IDEALE	75738 LLC				
	Name of Lin	nited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please return all corresp	ondence 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 3302;	3		r -,	20.
		City/State and Zip Code		 - :	2024 OCT
	EUGENE@CFOINTL.CO			• : !	긐
For further information c	n-mail address: (i oncerning this matter, please ca	to be used for future annual report notificall:	cation)		U)
EVGENIY RIKOV, CP.		571 314-2515		·	X
Name o	f Person	Aren Code Daytime	Telephone Number	1 . :	ည်
Enclosed is a check for the	ne following amount:				
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Fili Certificate Certified C	of Status Topy	

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

IDEALE 75738 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 08/17/2023 _ and assigned Florida document number $\underline{L23000387821}$ 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 239 (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 flew registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address . Florida

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. Thereby confirm that the limited liability company has been notified in writing of this change.

Circ

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
AMBR	EVGENIY RIKOV	3500 W Hallandale Beach Blvd, Hollywood, FL 3	
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	10/04/2023
Effect If an ef	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.) Pursuant to 605.0207
Note:	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as
COCCIII	nent's effective date on the Department of State's records.
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rd is fi	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 led.
	10102
	10.4.23
Dated	
Dated	
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Dated	Signature of a member or authorized representative of a member

Filing Fee: \$25.00