## L2300400972

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## **COVER LETTER**

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sh LLC		•
Name of Limi	ted Liability Company	
Amendment and fee(s) are sub-	mitted for fitting.	
ondence concerning this matter	to the following:	
iryna voinash		
	Name of Person	<del></del> . <del>.</del>
Igor Voinash LLC		
	Firm/Company	
981 hwy 98 e suite 3-256		
	Address	<u> </u>
destin florida 32541	•	
<del></del>	City/State and Zip Code	
· -		fication)
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	251 554-1657 at ( )	
of Person		e Telephone Number
he following amount:		•
□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Section Corporations 27		rporations Tallahassee pe Street, Suite 810
	Amendment and fee(s) are substantial properties of Limit Amendment and fee(s) are substantial properties of	Amendment and fee(s) are submitted for filing.  Ondence concerning this matter to the following:  iryna voinash  Name of Person  Igor Voinash LLC  Firm/Company  981 hwy 98 e suite 3-256  Address  destin florida 32541  City/State and Zip Code iryna.voinash90@gmail.com  E-mail address: (to be used for future annual report notice concerning this matter, please call:  251  354-1657  at (

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2023 OCT 30 AHH: 11

igor voinash LLC The Articles of Organization for this Limited Liability Company were filed on 08-25-23 Florida document number 123000400972 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 "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 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 Florida 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 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

\*\*MBR = Authorized Member

Title	<u>Name</u>	Address	Type of Action
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		destin fl 32541	
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