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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LVM ACCOUNTING SERVICES, INC.

Account Number : I20200000105 : (561)927-7157 Fax Number : (305)912-0167

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:	 	 	

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN EURO PARTNERS LLC

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To:

TO:

COVER LETTER

TO: Registration Se Division of Cor				
EURO PAI	RTNERS LLC			
SUBJECT:				
The control to follow of	A	andread Constitue		
	Amendment and fee(s) are sub			
Please return all correspo	ondence concerning this matter	to the following:		
	BEATA A HIPSZ			
		Name of Person		
	EURO PARTNERS LLC			
		Firm/Company		
5523 N MILITARY TRL, SUITE 1201				
		Address		
	BOCA RATON, FL 33496	6		
		City/State and Zip Code		
	E-mail address: (to be used for future annual report no	afication)	
For further information of	oncerning this matter, please c	all:		
BEATA A HIPSZ		754 271-7185		
Name o	t Person	Area Code Daytin	ne Telephone Number	
Enclosed is a check for the	te following amount:			
□ \$25.00 Filing Fee	■ \$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)	
Mailing Address: Registration Section		Street Address: Registration Se	ection	
Division of C P.O. Box 632	orporations	Division of Co	rporations	
Tallahassee, 1		The Centre of 2415 N. Monro	ne Street, Suite 810	

Tallahassee, FL 32303

To:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**



FURO PARTNERS LLC

(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appe Liability Company	ars on our records.)	$ \mathcal{L} \mathcal{G}_{\mathcal{G}_{i}}$
The Articles of Organization for this Limited Liability Company Florida document number 1.23000406255	were filed on _	08/29/2023	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company	here:	
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the	designation "LLC" o	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	7531 N Federal HWY E-3		
(Principal office address MUST BE A STREET ADDRESS)	Boca Raton, FL 33487		
(Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our		e name of the new regist
New Registered Office Address:			
	Enter Florido street address		
	City	, Flori	daZip Code
Now Designated Assert Classical Colonia, to the control Designated Assert	•		zip Cone
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent and agre			,

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>	<u>Address</u>	Type of Action
MGR	ASHOT NERSISYAN	5523 N MILITARY TRL, SUITE 1201	□Add
		BOCA RATON, FL 33496	■Remove
			□Change
AMBR	BEATA A HIPSZ	5523 N MILITARY TRL, SUITE 1201	🗐 Add
		BOCA RATON, FL 33496	∐Remove
			DChange
			□ □Add
			DChange C
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			Remove
			Change
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Page: 6 of 6

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Filing Fee: \$25.00

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Typed or printed name of signee