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COVER LETTER

TO: Registration S Division of Co	ection rporations		
	IAN 147972 LLC		
SUBJECT:	Name of Lir	mited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sul	bmitted for filing.	
Please return all corresp	ondence concerning this matter	r to the following:	
	EVGENIY RIKOV, CPA		
		Name of Person	_
	CFO INTERNATIONAL	LLC	
		Firm/Company	
	3500 W HALLANDALE	BEACH BLVD	
		Address	
	HOLLYWOOD, FL 3302	13	
	EUGENE@CFOINTL.CO	City/State and Zip Code	2021 SQ
	•	(to be used for future annual report notification)	
For further information of	concerning this matter, please c	call:	2024 OCT -5 SCORTIARY
EVGENTY RIKOV, CP	A	571 314-2515	
Name o	of Person	at ()Area Code Daytime Telephone Numbe	MAII: 32
Enclosed is a check for the	he following amount:		
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certified	ate of Status &
Mailing Addres Registration 5	Section	Street Address: Registration Section	
Division of C	-	Division of Corporations	
P.O. Box 632 Tallahassee, I		The Centre of Tallahassee	210

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MONEYCAN 147972 LLC			
(<u>Name of the Limited Liability Compa</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 $\frac{1.23000415844}{1.23000415844}$.	were filed on and assigned and assigned		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	pility company here:		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "L.L.C" 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 270		
	HOLLYWOOD, FL 33023		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	202		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, enter the name of the new registered		
	過量道		
Name of New Registered Agent:	<u></u>		
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. 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, I	
			70
			□Change
			□Add
			□Remove
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E CCont	10/04/2023
(If an eff <u>Note:</u>	ve date, if other than the date of filing: (optional) ective 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 (3) If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ent's effective date on the Department of State's records.
the recor	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	10.423
	Signature of a member or authorized representative of a member
	EVGENIY RIKOV, CPA
	Typed or printed name of signee

• . .

Filing Fee: \$25.00