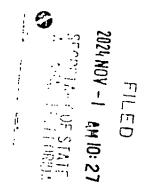


(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





11/01/24--01012--016 **25.00



COVER LETTER

SUBJECT:	SERGII PA	S LLC			
Sobace (.		Name of Lim	ited Liability Company		
The enclosed	l Articles of A	Amendment and fee(s) are sub	mitted for filing.		
Please return	all correspor	ndence concerning this matter	to the following:		
		PASTUSHAK, SERGII			
		-	Name of Person		
		SERGII PAS LLC			
			Firm/Company		
		1600 TAFT ST , APT 931			
			Address		
		HOLLYWOOD, FL 3302	0		
			City/State and Zip Code		
		pastushaksergio@gmail.com	n to be used for future annual re	nor natification\	
Kar further is	nformation co	oncerning this matter, please call		port notineation)	
		meening this matter, please co			
PASTUSHA	AK, SERGII	_	745 2390 at ()		
	Name of	Person	Area Code	Daytime Telepho	ne Number
Enclosed is a	a check for th	e following amount:			
■ \$25.00 B	filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ S55.00 Filing Fee & Certified Copy (additional copy is enclo		\$60.00 Filing Fcc, Certificate of Status & Certified Copy (additional copy is enclosed)

TO:

Registration Section **Division of Corporations**

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

SERGII PAS 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 ______ and assigned Florida document number _____L23000531096 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 <u>BE A POST OFFICE BOX)</u> 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: PASTUSHAK, SERGII Name of New Registered Agent: 1600 TAFT ST, APT 931 New Registered Office Address: Enter Florida street address , Florida 33020
Zip Code HOLLYWOOD City

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

AMBR = Authorized Member

<u>T'itle</u>	Name	Address	Type of Action
MGR	PASTUSHAK, SERGII	1600 TAFT ST ,APT 931, HOLLYWOOD, FL 330.	20 □ Add
			Remove
			Change
.			□Add
			□Remove
			Change
			🗀 Add
			□Remove
			□Change
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			Change
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			□Change

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(If an effe	ve date, if other than the date of filing:
he record ord is file	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after thed.
Dated _	10.74.74
	Signature of a member or authorized representative of a member
	PASTUSHAK, SERGII

Filing Fee: \$25.00