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(Requestor's Name)
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(Business Entity Name)
(Document Number)
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COVER LETTER

Registration Section

TO:

Division of Cor	porations				
	HANGE L.L.C.				
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	EKATERINA KISSELEV	A			
		Name of Person			
	EGK SOLUTIONS LLC				
		Firm/Company			
	7901 4TH ST N STE 103				
		Address			
	SAINT PETERSBURG FLORIDA 33702				
		City/State and Zip Code			
	OFFICE@EGKSOLUTION				
	E-mail address: (to be used for future annual report notif	ication)		
For further information c	concerning this matter, please c	all:			
EKATERINA KISSELEVA		at () 214 2848 Area Code Daytime			
Name o	f Person	Area Code Daytime	Telephone Number		
Enclosed is a check for the	he following amount:				
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
Mailing Address Registration: Division of C P.O. Box 632 Tallahassee.	Section Corporations 27	Street Address: Registration Sec Division of Cor The Centre of T 2415 N. Monroe	porations		
		Tallahassee, FL			

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

<u> Jability Company</u> Florida Limited Lia	as it now appears on ou bility Company)	r record <u>s.</u>)	
			_ and assigned
ng:			
e limited liabili	ty company here:		
s "Limited Liability	y Company," the designation	on "LLC" or the abbro	eviation "L.L.C."
e:			
(DDRESS)			
			
<u> </u>			
stered office ad sere:	ldress on our records	, enter the name	of the new registered
	Enter Florida stre	et address	
		, Florida	
	City	<u> </u>	Zip Code
	lity Company wang: e limited liability e: (DDRESS)	lity Company were filed on 08/20/201 ng: e limited liability company here: c Limited Liability Company," the designation: e: (IDDRESS) Stered office address on our records ere: Enter Florida stre	e limited liability company here: S"Limited Liability Company," the designation "LLC" or the abbre e: [DDRESS] Stered office address on our records, enter the name ere: 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.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	ZABALUEVA TATIANA	150 SUNNY ISLES BLVD APT 802	□Add
		SUNNY ISLES BEACH FL 33160	■Remove
			□Change
			DAdd
			Remove
			□Change
<u>.</u>			□Adđ
			□Remove
			□Change
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te: It	e date, if other than the date of filing:
s tile	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after th I.
ted _	Roman Zabaluev Signature of a member or authorized representative of a member ROMAN ZABALUEV Typed or printed name of signee
	Roman Zabaluev
	Signature of a member or authorized representative of a member
	Signature of a member of additional representation