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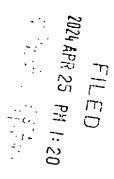
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
J. HORNE MAY 1 4 2024

Office Use Only



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04/25/24--01004--002 **25.00



Karapet Tumanian

Phone number: 4246443494

Return address: 701 Three Islands Blvd, Apt 203

Hallandale Beach, FL 33009

Please add me as a authorized user and add ein If any issue or questions regarding this case, please call me

July

Thank you

	Registration Se Division of Cor						
	KARTUMI	LC					
SUBJEC	T:	Name of Lim	ited Liability Company				
The encto	sed Anicles of	Amendment and fee(s) are sub	mitted for filing.				
Please ret	um all correspo	ndence concerning this matter	to the following:				
		KARAPET TUMANIAN					
		KARTUMLEC	Name of Person				
			Firm/Company				
		701 THREE ISLANDS BL	VD, APT 203				
		Address HALLANDALE BEACH, FL 33009					
		KARTUMLBUSINESS@GM	City/State and Zip Code MAIL.COM				
		E-mail address: (to be used for future annual report notific	ation)			
For furthe	r information c	oncerning this matter, please ca	all;				
KARAPI	T TUMANIAN		424 6443494				
	Name o	l'Person	at ()Area Code Daytime	Pelephone Number			
Enclosed	is a check for tl	ne following amount:					
■ \$25,0	0 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)			
Ī	Mailing Addres Registration S	Section	Street Address: Registration Section of Corporation				

P.O. Box 6327

Tallahassee, FL 32314

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

IO ARTICLES OF ORGANIZATION **OF**

	ORGANIZATION	20.
	OF	CHAP TI
KARTUM LLC		73,00
(Name of the Limited Liability Comp (A Florida Limited	pany as it now appears on our records.) d Liability Company)	PH 1:21
The Articles of Organization for this Limited Liability Compan	y were filed on	and assigned
Florida document number		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
The new name must be distinguishable and contain the words "Limited Liab	bility Company," the designation "LLC" of	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 agent and/or the new registered office address here:	e address on our records, <u>enter th</u>	e name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
		. ,
- ,	, Flor	ida 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.

			•			•	•
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MGR = Manager AMBR = Authorized Member

<u>Title</u> MGRM	<u>Name</u> Karapet Tumanian	Address 701 THREE ISLANDS BLVD, APT 203	Type of Action
		HALLANDALE BEACH, FL 33009	≅ Add
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			□Adđ
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□Change

ffect	ive date, if other than the date of filing:
an ei Inter	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as
ocur	nent's effective date on the Department of State's records.
reco	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
l is f	
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atod	4·19/2024
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	A rediction
	Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member KARAPET TUMANIAN