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| To: | | |
|---------|--|---------------------------|
| | Division of Corporations | |
| | Fax Number : (850)617-6383 | |
| From: | | |
| | Account Name : SORSHER & ASSOCI | IATES, LLC. |
| | Account Number : I20170000056 | • |
| | Phone : (954)842-2931 | |
| | Fax Number : (954)842-2936 | : |
| ##Entan | the email address for this bust. | |
| an | the email address for this business nual report mailings. Enter only on | e email address please.** |
| | ail Address: | į. |

KIRUSHA LLC

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 05 |
| Estimated Charge | \$25.00 |

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Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

| TO: | Registration Division of C | | | |
|-----------------|--|--|--|---|
| SUBJE | KIRUSH | j a llc | | |
| SUBJE | CI: | Name of Lin | nited Liability Company | · |
| The enc | losed Articles | of Amendment and fee(s) are sui | bmitted for filing. | |
| Please r | etum all corres | pondence concerning this matter | to the following: | |
| | | KIRA RUTKOUSKAYA | | |
| | | | Name of Person | |
| | | KIRUSHA LLC | | |
| | | | Firm/Company | |
| | | 3475 N COUNTRY CLU | B DR APT 816 | |
| | | | Address | |
| | | AVENTURA, FL 33180 | | |
| | | | City/State and Zip Code | |
| | | kira.rutkouskaya03091996 | • • | |
| re1 | | | to be used for future annual report not | ification) |
| ror runt | ner information | concerning this matter, please of | all: | |
| KIRA R | RUTKOUSKA` | YA | 786 833-0871 | |
| | Name | of Person | | ne Telephone Number |
| Enclosed | is a check for | the following amount: | | |
| ■ \$2 5. | .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 (*dditional copy is enclosed) |
| | Mailing Addr Registration Division of P.O. Box 63 Tallahassee, | Section Corporations 27 | Street Address: Registration Se Division of Cor The Centre of T 2415 N. Monro Tallahassee, FL | porations fallahassee e Street, Suite 810 |

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| KIRU\$HA LLC | | | |
|--|---|--|-----------|
| (Name of the Lin | nited Liability Company as it now app (A Florida Limited Liability Company | ears on our records.) | |
| The Articles of Organization for this Limited | Liability Company were filed on | 05/06/2024 and assigned | |
| Florida document number L24000212084 | , | | |
| This amendment is submitted to amend the fo | llowing: | | |
| A. If amending name, enter the new name | of the limited liability company | <u>here</u> : | |
| The new name must be distinguishable and contain the | words "Limited Liability Company," the | e designation "LLC" or the abbreviation "L.L.C." | _ |
| Enter new principal offices address, if appl | icable: | · · · · · · · · · · · · · · · · · · · | |
| (Principal office address MUST BE A STRE | ET ADDRESS) | | |
| | | | OD S |
| | | | _ ; |
| Enter new mailing address, if applicable: | | | |
| Mailing address MAY BE A POST OFFICE | E BOX) | 3 1 N | · . |
| | | 35 - IT | ! |
| B. If amending the registered agent and/or | registered office address on our | records, enter the name of the new regist | ; ered |
| agent and/or the new registered office addre | ess here: | | 69 |
| Name of New Registered Agent: | KIRA RUTKOUSKAYA | · Co | _ |
| New Registered Office Address: | 3475 N COUNTRY CLUB DR | APT 816 | |
| | Enter Fl | orida street address | - |
| | AVENTURA | , Florida ³³¹⁸⁰ | |
| | City | 7in C- 4 | - |

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.

Kira Ritkouskaya

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>Title</u> | Name | Address | Type of Action |
|--------------|------------------|--------------------------------|---------------------------|
| AMBR | KIRA RUTKOUSKAYA | 3475 N COUNTRY CLUB DR APT 816 | |
| | | AVENTURA, FL 33180 | _ |
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| Effective date, if other than | the date of filing: (optional) must be specific and cannot be prior to date of filing or more than 90 days after filing.) | |
| TANK OF MILE OFFICE VENCHINEST ME HE | over 4003 hot meet the applicable statified filling remained this date of | Pursuant to 605.0207 : vill not be listed as t |
| document's effective date on th | Department of State's records. | |
| | | |
| e record specifies a delayed effe rd is filed. | ctive date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The | 90th day after the |
| ia is med. | | |
| 05/21 Dated | 2024 | |
| Jaieu | · | |
| | Kina Rutkouskaya Signature of a member or authorized representative of a member | |
| | Signature of a member or authorized representative of a member | |
| KIRA RUTKOUSK | | |
| | Typed or printed name of signed | |

Filing Fee: \$25.00