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## **COVER LETTER**

Registration Section

TO:

Division of Cor	rporations			
MEROPRI	LLC			
SUBJECT:	Name of Lin	nited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Mikhail Dubrovin			
	<u> </u>	Name of Person	<del></del>	
	Meropri LLC			
		Firm/Company		
	411 SW 7th Street			
		Address	<del> </del>	
	Fort Lauderdale			
		City/State and Zip Code		
	mikledubrovin@gmail.com		*···	
		to be used for future annual report not	tification)	
For further information c	oncerning this matter, please c	all:		
Mikhail Dubrovin		754 2322303 at ()		
Name o	l Person	Area Code Daytir	ne Telephone Number	
Enclosed is a check for the	ne following amount:			
■ \$25.00 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 (additional copy is enclosed)	
Mailing Addres		Street Address:	ontion.	
Registration Section Division of Corporations		-	Registration Section Division of Corporations	
P.O. Box 632	7	The Centre of	Tallahassee	
Tallahassee, l	FL 32314	2415 N. Monro	be Street, Suite 810	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MEROPRI LLC		
( <u>Name of the Limited Liability Comp</u> (A Florida Limited	any as it now appears on our records Liability Company)	اء
The Articles of Organization for this Limited Liability Company	y were filed on <u>05/22/2024</u>	and assigned
lorida document number 1.24000238188		
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	bility company here:	
he new name must be distinguishable and contain the words "Limited Liab	oility Company," the designation "LLC"	`or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		24
Principal office address MUST BE A STREET ADDRESS)		
		1 · · · · · · · · · · · · · · · · · · ·
		· · · · · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable:		, , ,
Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
		3*
3. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter	the name of the new regi
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	,
	Fla	orida
<del></del>	City	orida 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.

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

	E7	
AMBR =	Authorized	Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	BETANCOURT, HANNA	3255 NE 184TH ST APT 12117, AVENTURA, FL	331 □Add
			=Remove
			□Change
			□ Add
			□Remove
			□ Change
			□Remove
			□Change
			□Remove
			□ Change
			□Add
			Пепюче
	.1		Change
			🗆 Add
			□Remove
			□Change

Mikhail Dubrovin is the sol	e member of the company.	
The updated list of member	rs is as follows: Mikhail Dubrovin, 411 7th Street, Fort Lauderdale, FL 33315	
<u></u>		<del></del>
		<del></del>
,		
Tective date, if other than the an effective date is listed, the date in	he date of filing:(optional) nust be specific and cannot be prior to date of filing or more than 90 days after filing.) Pu block does not meet the applicable statutory filing requirements, this date wil	irsuant to 605.0207
ote: If the date inserted in this ocument's effective date on the	Department of State's records.	
record specifies a delayed effect is filed.	tive date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90	0th day after the
July, 15	2024	
	Durho kun	
	Signature of a member or authorized representative of a member	

Filing Fee: \$25.00