L24000307408

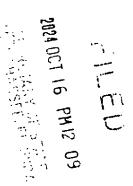
(Requesto	or's Name)
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PICK-UP	WAIT MAIL
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Certified Copies	Certificates of Status
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700437774437 LLC Amenl

10/16/24--01012--014 **25.00



A. RAMSEY

COVER LETTER

TO:	Registration Se Division of Cor				
SUBJEC	COLUMBI	JS USA LLC	•		
SUBJEA		Name of Lin	ited Liability Company		
The encl	losed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please re	eturn all correspo	ondence concerning this matter	to the following:		
		ELENA POMINOVA			
		_	Name of Person		
		COLUMBUS USA LLC			
			Firm/Company		
		16850 COLLINS AVE# 1	12-620		
		Address			
		SUNNY ISLES BEACH,	FL 33160		
			City/State and Zip Code		
		pominova.usa@gmail.com	to be used for future annual report notifical	tion)	
For furth	ner information c	oncerning this matter, please c		non,	
		Ç			
——	VASILEVA		917 295-0710 at ()	·	
	Name o	f Person	Area Code Daytime To	elephone Number	
Enclosed	l is a check for th	ne 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 (additional copy is enclosed)	
	Mailing Addres Registration S		Street Address: Registration Section	on	

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations
The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILEU

2024 OCT 16 PM 12 09

COLUMBUS USA 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 Com-	pany were filed on 07/10/2024	and assigned
Florida document number L24000307408		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	l 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 ADDRES		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	ffice address on our records, <u>e</u>	nter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street a	ddress
	City	
Now Designated trans-	·	Zip Code
New Registered Agent's Signature, if changing Registered A		
I hereby accept the appointment as registered agent and provisions of all statutes relative to the proper and compacted the obligations of my position as registered agent being filed to merely reflect a change in the registered company has been notified in writing of this change.	plete performance of my dutie it as provided for in Chapter (es, and I am familiar with and 605, F.S. Or, if this document is
ī	f Changing Registered Agent, Signat	ture 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>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	LINDA VASILEVA	16850 COLLINS AVE# 112-620	≣ Add
		SUNNY ISLES BEACH, FL 33160	□Remove
			□Change
 _			□Add
			□Remove
			□Change
			🗆 Add
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			□ Change

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ELENA POMINOVA	CLUMA DOMESON.			
Typed or printed name of signer		7 1	4	

Filing Fee: \$25.00