124000359287

(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.





400438667774

10/28/24--01080--008 **25.00

24 EST 23 (A) 57 43 (B) 1 E (A) 53 43

COVER LETTER

1

TO: Registration Section

Tallahassee, FL 32314

Division of Corpo	prations				
SUBJECT: V		ER LLC ted Liability Company			
The enclosed Articles of A	mendment and fee(s) are sub	mitted for filing.			
Please return all correspond	dence concerning this matter	to the following:			
	Vladimir Mostovoi Name of Person VM Installer UC				
		Firm/Company			
·	8325 Bay P	ointe Dr. Apt 9	BOBN		
	Ta	mpa F 3 1446 City/State and Zip Code ostovoi 7 16 @ g/ to be used for future annual report noti	336 15		
	Vladimir m E-mail address: (1	ostovoi 716 @ g/	nail.com		
For further information co	ncerning this matter, please ca	all:			
Maria Name of	Kikot	at (<u>603</u>) <u>264</u> Area Code Daytim	6 3 0 8 te Telephone Number		
Enclosed is a check for the	following amount:				
\$25.00 Filing Fee	S30.00 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 So	ection	Street Address: Registration Se			
Division of Co P.O. Box 6327	-	Division of Cor The Centre of T	=		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

VM INSTA	· · · · · · · · · · · · · · · · · · ·
(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our records.) ability Company)
The Articles of Organization for this Limited Liability Company villarida document number	were filed on0 8 /15 / 2024 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	lity company here:
The new name must be distinguishable and contain the words "Limited Liability	ty Company," the designation "L.L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	8325 Bay Pointe Dr. Apt 808M
(Principal office address MUST BE A STREET ADDRESS)	Tampa, FL, 33615
Enter new mailing address, if applicable:	8325 Bay Pointe Dr. Apt 808 N
(Mailing address MAY BE A POST OFFICE BOX)	Tampa, FL, 33615
B. If amending the registered agent and/or registered office at agent and/or the new registered office address here:	ddress on our records, enter the name of the new registered
agent and/or the new registered office address here.	
Name of New Registered Agent: Vladi	mir Mostovoi
New Registered Office Address: \$325	Bory Pointe Dr. Apt BOBN Enter Florida street address
	Cily Florida 336 15 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 AMBR = Authorized Member Type of Action Address <u>Title</u> **Name** KIKOT, MARIJA Mar □Add Jacksonville, FL, 32256 ____ □Change MOSTOVOT, VLAOIMIR 3315 Bay Pointe Dr. Apt 308N MAdd
Tampa, FL, 33615 Mar _____ □Remove _____ □Change .____ □Add ____ Change ____ □ Add □Remove _____ Change _____ □Change _____ □Add □Remove

□ Change

	Just	replac	e Au	thorized	Person	n from	
		•		4		Mostoroi	
	and	upda	te the	address	, pleas	L	
	Wesness	(have	1 owner	UC	(Vladimir	Mostovoi)
				4. An a b			
_							
	·				· · · · · ·		
							
_							
an effec lote: If	tive date is listo `the date inse	ed, the date must crted in this bl	date of filing at be specific and ook does not n epartment of S	cannot be prior to da neet the applicable	ate of filing or statutory fi	(option r more than 90 days after f ling requirements, this	nal) ling.) Pursuant to 605.0207 date will not be fisted as
record Lis filed		layed effectiv	e date, but not	an effective time.	at 12:01 a.i	n. on the earlier of: (b)	The 90th day after the
	DRTO			2024.			
rated_(1		member or authorize			

Filing Fee: \$25.00