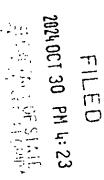
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(Ře	questor's Name)	
(Ad	dress)	
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(Cit	:y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer.	
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Office Use Only



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COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT: YR	GROUP PRO LLO	n ited Liability Company	
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	<u>Yevhen R</u>	YM by L Name of Person	
		Name of Person	
	YR GROUF	PRO LIC	
		Firm/Company	
	3069 LEMA	9 Ln Address	
		Address	
	North Port. F	L 34286	
		L 34286 City/State and Zip Code	
	YEVHEN, CYMBU E-mail address: (L @ gmail. COM to be used for future annual report not	fication)
For further information c	oncerning this matter, please c	·	
V	h 1	916 . 548. 11	PO
Name o	of Person	at (<u>916</u>) <u>578 - 11</u> Area Code Daytin	ne Telephone Number
Enclosed is a check for the	he 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 Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED 2024 OCT 30 PM 4: 25

组。特工一证SIAIE

YR GROUP PRO LLC	大大大大 等 (1.6) [1] [1]
(Name of the Limited Liability Company as it no (A Florida Limited Liability Co	ow appears on our records.) ompany)
The Articles of Organization for this Limited Liability Company were file	ed on
Florida document number <u>L24000 410638</u>	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability com	pany here:
The new name must be distinguishable and contain the words "Limited Liability Compar	ny," the designation "LLC" 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 address of agent and/or the new registered office address here:	on our records, <u>enter the name of the new registered</u>
Name of New Registered Agent	
New Registered Office Address:	Enter Florida street address
•	
City	, Florida 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

<u>Title</u>	Name	Address	Type of Action
OWNER MOJE	OLEKSANDE RYMBUL	1223 KAAYAN St. North Port,	FL 34288 WAdd
Majo			Remove
			□Change
			□Add
			Remove
			□Change
			DAdd
			□Remove
			□Change
			□Add
			Remove
			□Change
	·		DAdd
			Remove
			☐ Change
			□Add
			□Remove
			□Change

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ective	date, if other than the date of filing: (optional)
effect	date, if other than the date of filing:
	the date diserted in this crock does not meet the applicable statutory thing requirements, this date will not be listed it's effective date on the Department of State's records.
cord s s filed	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b). The 90th day after the
s meu	
ed	October 25/2024
	Oleks and Rymbul MS- Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member