L25000086529

(Requestor's Name)
(Address)
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G-412512025

COVER LETTER

SUBJECT: ALL YOU	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:	
	Natalia Bazhenova		
		Name of Person	
	Ocean Business Consulting		
		Firm/Company	
	5241 NE 26 Ave		
		Address	
	Fort Lauderdale, FL 33308	.	
		City/State and Zip Code	
	oceanconsult1@gmail.com		S
	E-mail address: (to be used for future annual report notif	ication)
For further information c	oncerning this matter, please c	all:	
Natalia Bazhenova		at (305) 5281526	
Name o	f Person	Area Code Daytimo	e Telephone Number
Enclosed is a check for th	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	<u>s:</u>	Street Address:	

Registration Section
Division of Corporations
P.O. Box 6327

Tallahassee, FL 32314

TO:

Registration Section
Division of Corporations

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

All You Build LLC			
(Name of the Limited Liability (A Florida l	Company as it now appears on imited Liability Company) 0	our records.) 2/19/2025	1.
The Articles of Organization for this Limited Liability Co.	mpany were filed on All Ye	a Build LLC	and assigned
Florida document number 1.25000086529	_·		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limit	ed liability company here:		
The new name must be distinguishable and contain the words "Limite	ed Liability Company." the design	nation "LLC" or the al	obreviation "L.L.C."
Enter new principal offices address, if applicable:			
Principal office address MUST BE A STREET ADDRE	<u></u>	· · · · · · · · · · · · · · · · · · ·	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
Truming Gauress 1977 DE 177 DE 177 DE 1977			
B. If amending the registered agent and/or registered	office address on our reco	rds, <u>enter the nan</u>	e of the new register
agent and/or the new registered office address here:			
-			
Name of New Registered Agent:			
-	P. J. Fland		
Name of New Registered Agent:	Enter Florida s	street address	
Name of New Registered Agent:	Enter Florida : City	street address, Florida	Zip Code

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	<u>Address</u>	Type of Action
MGR	Rubtsov, Oleg	19111 COLLINS AVE 207	□Add
		SUNNY ISLES BEACH, FL 33160	□Remove
			⊞ Change
MGR	Rubtsov, Oleh	19111 COLLINS AVE 207	□Add
		SUNNY ISLES BEACH, FL 33160	□Remove
			□Change
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			□Remove
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			□Remove
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			□Remove
			□Change

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fective date, if other than the date of filing: 02/19/2025				
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