

L25000216176

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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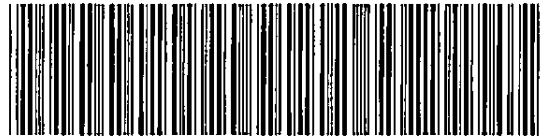
(Business Entity Name)

(Document Number)

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2025 MAY 27 PM 2:21
SECRETARY OF STATE
TALLAHASSEE, FL

Mal 7-23-23

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Spinneraker Bureau LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Nadiia Cherevychenko
Name of Person

Spinneraker Bureau LLC
Firm/Company

5221 SW 85th
Address

Plantation, FL, 33317
City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Nadiia Cherevychenko at (323) 899 2320
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the 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

SECRETARY OF STATE
TALLAHASSEE, FL

2025 MAY 27 PM 2:21

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Spinnaker Bureau 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 Company were filed on May 06, 2025 and assigned Florida document number L25000216146

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited 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 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 on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

Florida

City

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 Changing Registered Agent, Signature of New Registered Agent

[illegible]

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Article III:

The name and Florida street address of the
registered agent is:

Nadiia Cherevychenko

5221 SW 85th

Plantation, FL, 33317

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SECRETARY OF STATE
TALLAHASSEE, FL

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated May 20, 2025
HCH

Signature of a member or authorized representative of a member

Nadiia Cherevychenko

Typed or printed name of signee

**Electronic Articles of Organization
For
Florida Limited Liability Company**

L25000216176
FILED 8:00 AM
May 06, 2025
Sec. Of State
mhhitchcock

Article I

The name of the Limited Liability Company is:

SPINNAKER BUREAU LLC

Section 1

The principal office of the Limited Liability Company is:

5221 SW 8ST

TALLAHASSEE, FL 32317

The mailing address of the Limited Liability Company is:

5221 SW 8ST

TALLAHASSEE, FL 32317

Section 2

The name and Florida Street address of the registered agent is:

NADIA CHEREVYCHENKO

5221 SW 8ST
TALLAHASSEE, FL 32317

cherovychenko

SECRETARY OF STATE
TALLAHASSEE, FL

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Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature: NADIA CHEREVYCHENKO

Signature of member or an authorized representative

Electronic Signature: NADIA CHEREVYCHENKO

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.