(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
		- 40
(City	//State/Zip/Phon	e#)
PICK-UP	WAIT	MAIL
(Bus	siness Entity Na	me)
(Doc	cument Number)	
Certified Copies	Certificate	s of Status
Special Instructions to F	Filing Officer:	-



700260093357

05/19/14--01013---005 **25.00

07/07/14--01001--003 **10.08



Office Use Only

00789,06342,00/07/11/14

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: The Code of Success /nc 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:
Nikolay Dutov Name of Person
Firm/Company
Aven Liva Fl. 3318
City/State and Zip Code 834657000000000000000000000000000000000000
For further information concerning this matter, please call:
Ni Kolau Duijov at (784 244 64 9 9 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\simeg \text{Solution} \text{Solution} \text{Solution} \text{Filing Fee & Certificate of Status} \$\square \text{Solution} \text{Solution} \text{Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)} \$\square \text{Solution} \text{Certified Copy (additional copy is enclosed)} \$\square \text{Solution} \t
MAILING ADDRESS: Registration Section Registration Section Registration of Comparations

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

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

1005,4 9nul

Nikolay Dutov 3701 N. Country Club Dr. 1208 Aventura, FL 33180

Ref. Number: P10000075834 SUBJECT: THE CODE OF SUCCESS, INC.

We have received your document for THE CODE OF SUCCESS, INC. and your check(s) totaling \$25.00. However, the enclosed document has not been filled and is being returned for the following correction(s):

The above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed and an additional filling fee of \$10.00 is due.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 014A00012022

Annette Ramsey Regulatory Specialist II

RECEIVED

14 JUL -3 AM 10: 03

WESTON OF COMPANIONS

gro.sidnus.www

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

COVER LETTER

Division of Corporations The Code of Success/NC P100000 75834 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Nikolay Dutov Firm/ Company 18061 Biscayne BIV PHI-2 Aventura FL 33/60 City/ State and Zip Code 934.9570 agmail. em For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □S43.75 Filing Fee & □S52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

Mailing Address

TO: Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, PL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment

Articles of Incorporation The Code of Success 1 W 2014 JUL -3 PH 2: 30

FILED

(Name of Corporation as currently	y filed with the	Florida Dept, of	State)	en CTATE
P100000	75834	· 		HAGSEE, FLORIDA
(Document Number	of Corporation	(if known)	19	
Pursuant to the provisions of section 607.1006, Floits Articles of Incorporation:	rida Statutes, this	s Florida Profit C	Corporation add	opts the following amendme
A. If amending name, enter the new name of the	e corporation:			
•				The new
name must be distinguishable and contain the v "Corp.," "Inc.," or Co.," or the designation "Coword "chartered," "professional association," or t	orp," "Inc," or	"Co". A profess "P.A."	ional corporat	ion name must contain the
B. <u>Enter new principal office address, if applica</u> (Principal office address <u>MUST BE A STREET A</u>		18061 PK1	Biscay	ne blv
		AV		1 FL 33180
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>BOX</u>)	18061 PH A Ver	Bisco 1-2 ntura	FL 33/60
D. If amending the registered agent and/or registered agent and/or the new register			enter the name	e of the
Name of New Registered Agent				
	(Florida s	treet address)		
New Registered Office Address:			, Florida_	
	(City	9		(Zip Code)
New Registered Agent's Signature, if changing I hereby accept the appaintment as registered agen	Registered Agen at. I am familiar	st: · with and accept t	the obligations	of the position.

Signature of New Registered Agent, if changing

If amending the Officer's and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X_Change	PT John D	<u>000</u>	·
X Remove	V Mike J	ones	
X Add	SV Sally S	Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	5_	Tamara Dutorg	3101 N Country Chi #1207
Remove			Aventura fl 32180
2) Change	5_	Svetlana Dutov	18061 Biscayne Blv PHI-2 Aventura fl 33/60
Remove 3) Change		····	Aventura fl 33/60
Add			
4) Change	**************************************		
Remove			
5) Change			
Remove			
6) Change			
Add			
Remove			

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
an amendment provides for an excha	range, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:

The date of each amendment(s) adoption: date this document was signed.	6-13-19	, if other than t
Effective date if applicable:	B-15-14	
Елесиче вие паррисиме.	(no more than 90 days after amendment file date)	_
Adoption of Amendment(s) (9	CHECK ONE)	
The amendment(s) was/were adopted by the shareholders was/were sufficient for	the shareholders. The number of votes cast for the amendment(s) or approval.	
	the shareholders through voting groups. The following statement ing group entitled to vote separately on the amendment(s):	
"The number of votes cast for the at	mendment(s) was/were sufficient for approval	
by	**	
((voting group)	
The amendment(s) was/were adopted by taction was not required.	the board of directors without shareholder action and shareholder	
The amendment(s) was/were adopted by t action was not required.	the incorporators without shareholder action and shareholder	
Dated 6-15-14		
Signature	77	
selected, by an i	resident or other officer – if directors or officers have not been neorporator – if in the hands of a receiver, trustee, or other court fary by that fiduciary)	
	Tixolay Dutov	
	(Typed or printed name of person signing)	
	P.S.	 -
	(Title of person signing)	