## P20000071898

(Red	questor's Name)	
(Add	dress)	
	dress)	
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(City	y/State/Zip/Phone #)	
PICK-UP	WAIT MAIL	
		_
(Bus	siness Entity Name)	
(Do	cument Number)	_
Certified Copies	Certificates of Status	
Special Instructions to I	Filing Officer:	
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10/28/20--01012--008 \*\*35.00



WHRD



## **COVER LETTER**

Amendment Section

TO:

SUBJECT: LILI & MILA PREMIER INTERNATIONAL R Name of Corporation	EALTY, INC	<u>.                                    </u>
DOCUMENT NUMBER: P20000071898		
The enclosed Statement of Change of Registered Office/	Agent and fe	e are submitted for filing.
Please return all correspondence concerning this matter t	o the followi	ng:
LILIYA M		
Name of Contact Person	<del>_</del>	
LILIYA KALYNOVYCH		
Firm/Company		
LILI & MILA PREMIER INTERNATIONAL REALTY, INC	C.	
Address	<del></del>	
10505 VIGNON CT WELLINGTON, FL 33449		
City/State and Zip Code	<del></del>	
lilimilamiami88@yahoo.com		
E-mail address: (to be used for future annual report	notification	)
For further information concerning this matter, please ca	il:	
LILIYA KALYNOVYCH	at ( <sup>561</sup>	701-3165 ode & Daytime Telephone Numb
Name of Contact Person	Area Co	ode & Daytime Telephone Numb

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

## Articles of Amendment to Articles of Incorporation of

FILED

LILI & MILA PREMIER INTERNATIONAL REALTY, INC.

(Name o	of Corporation as currently	filed with the Florida D	BAPTERALEPH 5: 03	3
P20000071898			CRETARY OF STATE	_
	(Document Number of	Corporation (if known)	LAPASOSS, FL	<u>:</u>
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this I	lorida Profit Corporation	adopts the following ar	nendment(s) to
A. If amending name, enter the new na	ame of the corporation:			
			Th	ie new
name must be distinguishable and contain "Inc.," or Co.," or the designation "Cohartered," "professional association,"	Corp," "Inc," or "Co". A	ompany," or "incorporate professional corporation	d" or the abbreviation " name must contain th	Corp.," ne word
B. Enter new principal office address, (Principal office address MUST BE A S				
C. Enter new mailing address, if appl (Mailing address MAY BE A POST  D. If amending the registered agent ar new registered agent and/or the new	OFFICE BOX) nd/or registered office addr		name of the	
Name of New Registered Agent	<u></u>		<del></del>	
	10505 VIGNON CT			
	(Florida stre	ei address)		
New Registered Office Address:	WELLINGTON		. Florida 33449	
	(	City)	(Zip Code	<del>.,</del>
New Registered Agent's Signature, if c I hereby accept the appointment as regist	tered agent. I am familiar w	ith and accept the obligati		
Check if applicable  ☐ The amendment(s) is/are being filed p	oursuant to s. 607.0120 (11) (	e), F.S.		

If amending the Officers 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)

Example:

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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	LILIYA KALYNOVYCH	10505 VIGNON CT
X Add			WELLINGTON FL 33449
Remove	445		1050-146010110T
2) Change	VP	LYUDMYLA KALYNOVYCH	10505 VIGNON CT
X Add			WELLINGTON FL 33449
Remove	Р	LILI KALYNOVYCH	10505 VIGNON CT WELLINGTON FL 33449
3 ) Change			WELLINGTON FL 33449
Add			·-·
X Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

ttach additional sheets, if necessary). (Be specific)	
· ··· · · ·	<del> </del>
	•
an amandment provides for an evaluate a realessification or consultation of issued charges	
an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	
······································	

•

The date of each amendmen		, if other than the
date this document was signed	10/23/2020	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, he Department of State's records.	this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/we action was not required.	re adopted by the incorporators, or board of directors without sharehold	er action and shareholder
	re adopted by the shareholders. The number of votes cast for the amendere sufficient for approval.	dment(s)
	re approved by the shareholders through voting groups. The following and for each voting group entitled to vote separately on the amendment(s	
"The number of votes	cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
Dated	1-23-20	
Signature _		
Se	by a director, president or other officer – if directors or officers have not elected, by an incorporator – if in the hands of a receiver, trustee, or oth oppointed fiduciary by that fiduciary)	
	(Typed or printed name of person signing)	
	(Typed of printed name of person signing)	
/	(Fite of person signing)	