# 115000234517

Office Use Only



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### **COVER LETTER**

TO: Registration Sec Division of Corp				
SUBJECT: APRR SO	OLUTIONS, LLC	ted Liability Company		
	rune w gin	ted blacinty company	2	;
The enclosed Articles of z	Amendment and fee(s) are sub-	nitted for filing.	<b>1</b>	,•
Please return all correspon	ndence concerning this matter	to the following:	9.	
			ູນ	
	Processing Department			
		Name of Person		
		Firm Company		
	5605 Riggins Court	Suite 200		
		Address		
	Reno, NV 89502			
		City/State and Zip Code		
	docs@incauthority.com E-mail address: (i	to be used for future annual report notif	ication)	
For further information co	oncerning this matter, please ca	di:		
Processing Departme	ent	at ( 800) 638-2320		
Name of			: Telephone Number	
Enclosed is a check for th	e 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)	
Registra	ING ADDRESS: ation Section	STREET/COURI Registration Section	n	
	n of Corporations ox 6327	Division of Corpor Clifton Building	ations	

Tallahassee, FL 32314

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

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited L	PRR SOLUTIONS, jability Company as it now	LLC appears on our records.	
	•		3
	ity Company were filed	on 12/11/18	and assigned 矣
Florida document number L18000284517	- <del></del> -		T
This amendment is submitted to amend the following	dia document number L18000284517  amendment is submitted to amend the following:  f amending name, enter the new name of the limited liability company here:  ew name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."  r new principal offices address, if applicable:    cipal office address MUST BE A STREET ADDRESS)    r new mailing address, if applicable:		
A. If amending name, enter the new name of the	e limited liability comp	any here:	
The new name must be distinguishable and contain the words	"Limited Liability Company	," the designation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if applicable	<u></u>		
(Principal office address MUST BE A STREET A	DDRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BO.	<u>v</u>		
		ess on our records, <u>en</u>	ter the name of the new
Name of New Registered Agent:			···
New Registered Office Address:			
	En	ter Florida street address	
-	City	, Florida	Ziv 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

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>	<u>Name</u>	Address	Type of Action
MGR	Paulina Rudnicka	1295_Mainsail Drive Apt 905	Ø Add
		Naples, FL 34114	☐ Remove
			Change
		_	
			Remove
			Change
		_	
			Remove
			Change
			Remove
			□ Change
			Remove
			□ Change
			Remove
			□ Change

	ling any other information, enter change(s) here: (Attach additional sheets, if necessary.)
_	
_	
Note: If	date, if other than the date of filing:
	ed specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier on the day after the record is filed.
Dated	11-11-19
	Signature of a member for futhorized representative of a member

Page 3 of 3

Filing Fee: \$25.00

TO: PHYSICAL: Dept. of State

Division of Corporations

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

MAILING: Dept. of State

Division of Corporations

Corporate Filings P.O. Box 6327

Tallahassee, FL 32314

FROM: National Corporate Headquarters, Inc.

5605 Riggins Court Suite 200

Reno NV 89502 (800) 638-2320 (775) 329-0852

DATE: Thursday, October 31, 2019

SENT VLA USPS

To Whom It May Concern:

Attached, please find the following document(s):

• Articles of Amendment to Articles of Organization For <u>APRR SOLUTIONS</u>, <u>LLC</u>

We have included payment in the amount of \$25.00 for the following fees:

Amendment

We have included one original

If there are any questions, please call 800-638-2320

## Please return the file stamped copy of Amendment to Articles of Organization to the address below:

Processing Department 5605 Riggins Court Suite 200 Reno NV 89502