# 116000116650

(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
· (Do	cument Number)	
Certified Copies	_ Certificate:	s of Status
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Special Instructions to	Filing Officer:	

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O SIMMONS JAN 25 2017

## **COVER LETTER**

Division of Cor			
SUBJECT:	PM VISION, L	LC	
SUBJECT:	Name of Lim	ited Liability Company	·
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspondence	ondence concerning this matter	to the following:	
	HARIA V	1BOHOUA	
		Name of Person	· · · · · · · · · · · · · · · · · · ·
	PM VISIC	Firm/Company	
		Firm/Company	
	17890 NE	3/st. COURT, +	IPT. 3223
		Address	
	AVENTURA	City/State and Zip Code  Colova @ gma;/  to be used for future annual report notif	160
	•	City/State and Zip Code	
	Maria Vyl	to be used for future annual report notif	(Coxton)
For further information c	concerning this matter, please co		
MARIA	VYBOHOVA	at ( <u>786</u> ) 253 - Area Code Daytime	-6051
Name o	f Person	Area Code Daytime	e Telephone Number
Enclosed is a check for t	he 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 Tallahassec, FL 32314

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

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

PM VISION, LIC	
(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	gned
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)	
	<u>. [11</u>
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	<u></u>
B. If amending the registered agent and/or registered office address on our records, <u>enter the name o</u> registered agent and/or the new registered office address here:	f the new
Name of New Registered Agent:	
New Registered Office Address:  Enter Florida street address	<del></del>
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

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
AMBR	PETRA BRUSALOVA	17890 NE 31 st. COURT,	🗆 Add
		APT. 3223	<b>K</b> Remove
		APT. 3223 AVENTURA, FL, 33/60	
	· · · · · · · · · · · · · · · · · · ·		🗆 Add
		<del> </del>	□ Remove
			Change
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f amendi	ing any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
<del>-, .</del> '-		<del></del>
		17 JAN 23 PH 3: 44
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an effectiviote: If the	date, if other than the date of filing:	605.0207 (3)(b listed as the
e record The 90	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the ea	arlier of:
ated	JANUARY 15 , 2017	
	Signature of a member or authorized representative of a member	_
	HARIA VYBOHWA—  Typed or printed name of signee	_

Page 3 of 3

Filing Fee: \$25.00

Petra Brusakova 17890 NE 31st COURT, Apt.3223 Aventura, Florida, 33160

### **RESIGNATION TO THE LLC**

LLC:

PM VISION LLC

Document Number: LIG000116650

17890 NE 31st Court, Apt.3223

Aventura, FL, 33160

I am voluntarily withdrawing from **PM VISION LLC**, document number LIG0001166 50 The PM VISION LLC has just been established and has no assets, thus I am not demanding any share of profits prior to this withdrawal.

Petra Brusakova

Petra Brusa Emo 01-15 - 2017