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(Re	questor's Name)	
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	ration Section on of Corporations	830 C
	RETTY TENDAS MOBILE BARTENDING, LLC	0.60/
SUBJECT: _	Name of Limited Liability Company	
The enclosed A	rticles of Amendment and fee(s) are submitted for filing.	
Please return al	l correspondence concerning this matter to the following:	
	ENRIQUE NICOLE WHITE	
	Name of Person	
	PRETTY TENDAS MOBILE BARTENDING, LLC	
	Firm/Company	
	8306 TUBMAN COURT SOUTH	
	Address	
	JACKSONVILLE, FL 32219	
	City/State and Zip Code	
	PRETTYTENDASMOBILE(a,GMAIL.COM E-mail address: (to be used for future annual report notification)	
For further into	rmation concerning this matter, please call:	
ENRIQUE NIC	OLE WHITE 904 250-3945	
	Name of Person Area Code Daytime Telephone Number	_
tenelosed is a et	neck for the following amount:	
	ne Fee - = \$30.00 Filing Fee &	دود

Certified Copy

(additional copy is enclosed)

MAILING ADDRESS:

Certificate of Status

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

STREET/COURIER ADDRESS:

Certificate of Status &

Certified Copy (additional copy is enclosed)

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PRETTY TENDAS MOBILE BARTENDING, 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 $\underline{\text{MAY }15,2017}$ ___ and assigned Florida document number $\frac{1.17000107134}{1.17000107134}$ 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 "LLC" 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 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 jurther 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. Thereby 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	ENRIQUE NICOLE WHITE	8306 TUBMAN COURT SOUTH.	Add
		4	□ Remove
			Change
MGR ENRIQUE NICOLE WHITE	ENRIQUE NICOLE WHITE	8306 TUBMAN COURT SOUTH.	∃ Add
			☐ Remove
			Change
			☐ Remove
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			Remove
			Change
			Remove
			☐ Change

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	20 <u>20</u>
etive date, if other than the date of filing: Hective date is listed, the date must be specific and cannot be prior to date of filing: If the date inserted in this block does not meet the applicable statutor ment's effective date on the Department of State's records.	(optional) ng or more than 90 days after filing.) Pursuant to 605.0 ry filing requirements, this date will not be listed
ecord specifies a delayed effective date, but not an effec e 90th day after the record is filed.	tive time, at 12:01 a.m. on the earlie
July 3 . 2017	

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Typed or printed name of signee

Filing Fee: \$25.00