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T. CLINE AUG - 8 JOIN EXAMINER

## **COVER LETTER**

## TO: Registration Section Division of Corporations

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Marinello Hedesa Enterprises, LLC name change to Beautiful Minds PPEC, LLC, SUBJECT:

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:

Gabriela Marinello

		Name of Person	·····	
	Beautiful Minds PPEC			18 APE
		Firm/Company	•	
	23846 SW 116th CT			en :
		Address	······	्र २
	Princeton, FL 33032			- 2 4
	Cit	v/State and Zip Code		
	marinello.enterprises@gmail	.com		
	E-mail address: (to be )	ised for future annual	report notification)	
For further information co	oncerning this matter, please call:			
Gabriela Marinello		786 222 at ( )	2- 6451	
Name of Person		Area Code	Daytime 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)

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, 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

( <u>Name of the Limited Liability Company as it now appears on our rec</u> (A Florida Limited Liability Company)	ords.)
The Articles of Organization for this Limited Liability Company were filed on <u>April 13th, 20</u> Florida document number <u>L18000093719</u> .	18 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here:	 כס
Beautiful Minds PPEC, LLC	<u>ب</u> ند در،
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "I	LC" or the abbreviation "LLC."
Enter new principal offices address, if applicable:	میں معرب
(Principal office address MUST BE A STREET ADDRESS)	. co
	24
Enter new mailing address, if applicable:	F

B. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new</u> registered agent and/or the new registered office address here:

Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street	address
_	City	Florida 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

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, <del>-</del>

<u>Title</u>	Name	Address	Type of Action
			🗆 Add
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			Remove
			Change
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			Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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E. Effective date, if other than the date of filing: <u>April 1376</u> (optional) (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

(If an effective date is listed, the date must be specific and cannol be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) <u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated		
	- MANINEDA	
	Signature of a member of authorized representative of a member	
	Typed or printed name of signer	
	Typed or printed name of signer	

Page 3 of 3

Filing Fee: \$25.00