

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000188020 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : PINPOINT GUIDANCE INC

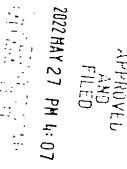
Account Number : I20180000092 Phone : (954)371-9511 : (954)933-3379 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email:	Address:	
CHIGIT	MUUI COO.	

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SPEECHLESS LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00



COVER LETTER

	Registration Sec Division of Corp		.,	•
	SPEECHLE	SS LLC		
SUBJEC	T:	Name of Limit	ed Liability Company	
The encl	acad Articles of E	Amendment and fee(s) are subn	nitted for filing.	
		idence concerning this matter t		
			DIANA M PEREZ	
			Name of Person	
			AMBR	
			Firm/Company	
			8361 NW 46 ST	
			Address	
			LAUDERHILL, FL 33351	
			City/State and Zip Code	
			sa@pinpointg.com	
			o be used for future annual report notif	ication)
For furth	ner information co	oncerning this matter, please ca	all:	
DIANA	M PEREZ		at () Area Code Daytime	
	Name o	Person	Area Code Daytime	: Telephone Number
Enclose	d is a check for th	ne following amount:		
≣ \$25	.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (udditional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration	Section	Street Address: Registration Sc	
	Division of C		Division of Cor The Centre of T	porations `allahassee
	P.O. Box 632 Tallahassee,			e Street, Suite 810

Tallahassec, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	HLESS LLC	
(Name of the Limited Liability Com (A Florida Limite	pany as if now appears on our records.) d Liability Company)	
The Articles of Organization for this Limited Liability Compar Florida document number <u>L18000106362</u>	ny were filed on <u>04/27/2018</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	ability company here:	
DP MAGIC TOUCH LLC		
The new name must be distinguishable and contain the words "Limited Lia	ability Company," the designation "LLC" or the abi	previation "L.L.C."
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 agent and/or the new registered office address here: Name of New Registered Agent:	ce address on our records, enter the nam	2022 HAY
Name Devicement Office Address		27
New Registered Office Address:	Enter Florida street address	
 -	, Florida	Zip Code
New Registered Agent's Signature, if changing Registered Age	ent:)7

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 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
			
			□Remove
			Change
			🗀 Add
			CRemove
			□ Change
			□Add
			□Remove
			Remove
			Change
			□Add
			□Removc
			□Add
			□Remove
			□ Change

-	
~	
-	
•	
-	
(If an c	tive date, if other than the date of filing: 105/27/2022
the rece	ord 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 filed.
Date	() wave fined)
	y
	DIANA M PEREZ Typed or printed name of signee

Filing Fee: \$25.00