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## COVER LETTER

**Division of Corporations** PLEASURE REST, 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: Gerarado Aviles Valle Name of Person PLEASURE REST, LLC Firm/Company 11497 Rocket BLV Address Orlando, FL 32824 City/State and Zip Code grtdaviles@yahoo.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Gerardo Aviles Valle Daytime Telephone Number Name of Person Enclosed is a check for the following amount: □ \$30.00 Filing Fee & **■** \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, □ \$25.00 Filing Fee

**Mailing Address:** 

TO:

Registration Section

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

Certificate of Status

Street Address:

Certified Copy

(additional copy is enclosed)

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Certificate of Status &

(additional copy is enclosed)

Certified Copy

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PLEASURE REST, 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 FLORIDA and assigned Florida document number \_\_L18000195837 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." 11497 Rocket BLV Enter new principal offices address, if applicable: Orlando, FL 32824 (Principal office address MUST BE A STREET ADDRESS) 11497 Rocket BLV Enter new mailing address, if applicable: Orlando, FL 32824 (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 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.

City

\_\_\_\_\_, Florida \_\_\_\_\_ Zip Code 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 Call 5 - 7: 17	Type of Action
MGR	Gerardo Aviles Valle	11497 Rocket BLV	<b>≣</b> Add
		Orlando. FL 32824	□Remove
			□ Change
MGR Stephanie Marie Aviles	3621 OCITA DRIVE	□Add	
		ORLANDO, FL 32837	Remove
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ective date, if other than the date of filing:  effective date is listed, the date must be specific and cannot be prior to date of filing or  e: If the date inserted in this block does not meet the applicable statutory fil  ument's effective date on the Department of State's records.	
cord specifies a delayed effective date, but not an effective time, at 12:01 a.n. filed.	n, on the earlier of: (b) The 90th day after the
September 2 2020.	
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Signature of a member or authorized representati	ive of a member

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