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(Requestor's Name)
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PICK-UP WAIT	MAIL
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2022 OCT -- 5 PM 3: 27

2022 OCT -6 PM 1:

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

PRS ONE, LLC				
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			 Art of Inc. File	
			 LTD Partnership File	
			 Foreign Corp. File	
		į	 L.C. File	
			 Fictitious Name File	
			 Trade/Service Mark	
			 Merger File	
		,	 Art, of Amend, File	
			 RA Resignation	
			 Dissolution / Withdrawal	
			 Annual Report / Reinstatement	
			 Cert. Copy	
			 Photo Copy	
			 Certificate of Good Standing	
			 Certificate of Status	
			 Certificate of Fictitious Name	
			 Corp Record Search	
			 Officer Search	
			 Fictitious Search	
Signature			 Fictitious Owner Search	
			 Vehicle Search	
			 Driving Record	
Requested by:		!	 UCC 1 or 3 File	
Name	Date	Time	 UCC 11 Search	
	Date	- 11110	 UCC Retrieval	

COVER LETTER

TQ: Registration Se Division of Cor			
SUBJECT: VQO	ONEUC		
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Pablo Pau	Name of Person	
	PRS ONE	Firm/Company	
	UB WN INFU	Ath Ave Address	
	Doral, FL, 33	City/State and Zip Code	
	butura (P	To be used for future annual report not	fication)
For further information c	oncerning this matter, please ca		
Palolo J Rave o	seo Silva Person		LUB Le Telephone Number
Enclosed is a check for the	ne following amount:		
□ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Sectificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration S Division of C P.O. Box 632	Section orporations	Street Address: Registration Se Division of Con The Centre of T	rporations

Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroc Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED
2022 OCT -6 PH 1:17

PRS ONE LLC		SECHETARY
(<u>Name of the Limi</u>	ted Liability Company as it now appears on our records.) (A Florida Limited Liability Company)	TALLAHASSEE, FL
The Articles of Organization for this Limited L	iability Company were filed on 10/06/202.	
Florida document number <u>U90005149</u>		
This amendment is submitted to amend the foll	lowing:	
A. If amending name, enter the new name o	of the limited liability company here:	
The new name must be distinguishable and contain the v	words "Limited Liability Company," the designation "LLC" o	r the abbreviation "L.L.C."
Enter new principal offices address, if applic	cable:	
(Principal office address MUST BE A STREE	ET ADDRESS)	
		<u> </u>
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE	BOX)	
B. If amending the registered agent and/or ragent and/or the new registered office addre	registered office address on our records, <u>enter th</u> ss here:	e name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Flori	da
	Citv	Zin 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 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
MGR	Anel M. Monkregno Sandoval	4741 NW BUTH AVE	X [Add
		Doral, FL, 33166	□Remove
			□ Change
MGR	Pablo T Pourseo Silva	4741 NW BYTH Ave	□ Add
		Doral, FL, 33166	🗆 Remove
			© Change
			□Add
			□Remove
			□Change
			
			□Remove
			□Change
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			□Add
			Change

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Signature of Emember or authorized representative of a member PABLO PAISSON SCIVA				> /									

Typed or printed name of signee