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Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : E ALEX ORTIZ, CPA, PA

Account Number : I20180000017 Phone : (305)340-2000 Fax Number : (786)953-6246

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

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# LLC AMND/RESTATE/CORRECT OR M/MG RESIGN THE PUKIS, LLC

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## **COVER LETTER**

TO: Designation 6	<b>^!</b>				
TO: Registration Se Division of Cor					
T)	HE PUKIS LLC				
SUBJECT:	Nume of Lin	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
		ALEX ORTIZ, CPA			
		Name of Person	<del></del>		
	, 1	E ALEX ORTIZ, CPA, PA			
		Firm/Company	<u> </u>		
	2727	PONCE DE LEON BLVD			
		Address	<del></del>	71. 20	
	CO	RAL GABLES, FL 33134		SECRETARY	71
	City/State and Zip Code				
	ALEX@ALEXORTIZCPA.COM  E-mail address: (to be used for future annual report notification)				
For further information c	oncerning this matter, please c			Y OF STATE SEE, FLORIE	ILED
ALEX ORTIZ, CPA		305 340-2000 at ()		PATE 2	
Name o	f Person		e Telephone Number		
Enclosed is a check for the	ne following amount:				
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing F Certificate of Certified Copy (additional copy of	Status & v	

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

Street Address:

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

### **# 3/ 5**

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

THE PUKIS LLC			
(Name of the Limi	ted Linbility Compa (A Florida Limited I	ny as it now anne liability Company)	grs on our records.)
The Articles of Organization for this Limited L Clorida document number L19000108784	iability Company	were filed on _	6/11/2021 and assigned
his amendment is submitted to amend the foll	owing:		
A. If amending name, enter the new name o	f the limited liab	ility company l	here:
he new name must be distinguishable and contain the v	vords "Limited Liabil	lity Company," the	e designation "LLC" or the abbreviation "L.L.C."
Inter new principal offices address, if applic	able:	2727 PONCE	DE LEON BLVD
Principal office address MUST BE A STREE	TADDRESS)	CORAL GAB	BLES, FL 33134
Enter new mailing address, if applicable:  "Mailing address MAY BE A POST OFFICE BOX"			DE LEON BLVD BLES, FL 33134
3. If amending the registered agent and/or agent and/or the new registered office addre		address on our	records, enter the name of the new regi
Name of New Registered Agent:	ORTIZ, ALEX		
New Registered Office Address:	2727 PONCE I	DE LEON BLVE	)
		•	lorida street address
	CORAL GABI		, Fiorida 33134
		City	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.

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 = M $AMBR = A$	anager uthorized Member		
Title	<u>Name</u>	Address	Type of Action
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			□Remove
			□Change
			□Add
			SECRED COMPANY
			SECRETARY OF SHATE OCHange
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			□Remove
			©Change
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un effective <u>ote:</u> If the	ate, if other the date is listed, the of date inserted in effective date of	date must be spec I this block doe	ific and can is not meet	not be prior the applica				r filing.) Pursu:	
record species filed.	cifies a delayed	effective date, t	out not an e	effective tin	ne, at 12:01	a.m. on the	carlier of: (t	) The 90th	day aft <del>er</del>
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-	X	Signatur	re of a mem	ber or autho	rized represe	ntative of a n	iember	<del></del>	

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