

L19 000 152317

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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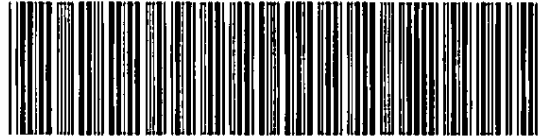
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FL

D. BRUCE  
FEB 28 2022



1317 Edgewater Dr. Suite 1259  
Orlando, FL 32804  
USA

February 4<sup>th</sup>, 2022

Division of Corporations  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32314

Attn: Registration Section

I hope this note finds you well.

I would like to amend the Articles of Organization for my company Pure Bliss Glow LLC. Please see below the list of amendments:

**Article III:**

Change business activities to Real Estate Activities. The company will be managing real estate properties.

**Remove members:**

Noelia Garcia  
Title: VP  
300 S Luna ct, Apt 5  
Hollywood, FL 33021

Arzu Yavuz  
Title: MGR  
300 S Luna ct, Apt 5  
Hollywood, FL 33021

**Add registered agent:**

Randy Milliken  
1317 Edgewater Dr.  
Orlando, FL 32804

Please call or email me if you have any questions regarding this matter.

  
Maureen J. McCalla  
President  
Pure Bliss Glow, LLC  
Direct line: 305-775-7993

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TALLAHASSEE, FL

# COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Pure Bliss Glow LLC  
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:

Maureen J McCalla  
Name of Person  
Pure Bliss Glow LLC  
Firm/Company  
1317 Edgewater Dr #1259  
Address  
Orlando, FL 32804  
City/State and Zip Code  
maureenmccalla@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Maureen J McCalla at (305) 775-7993  
Name of Person Area Code Daytime Telephone Number

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Enclosed is a check for the 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 Address:  
Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

Pure Bliss Glow, L.L.C.

(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 06/10/2019 and assigned Florida document number L19000152317.

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 "L.L.C." or the abbreviation "L.L.C."

**Enter new principal offices address, if applicable:**

(Principal office address MUST BE A STREET ADDRESS)

1317 Edgewater Dr #1259

Orlando, FL 32804

**Enter new mailing address, if applicable:**

(Mailing address MAY BE A POST OFFICE BOX)

1317 Edgewater Dr #1259

Orlando, FL 32804

**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:

Randy Milliken

New Registered Office Address:

1317 Edgewater Dr.

*Enter Florida street address*

Orlando

*City*

Florida

32804

*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

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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>	<u>Address</u>	<u>Type of Action</u>
VP	NOELIA GARCIA	300 S LUNA CT, APT 5	<input type="checkbox"/> Add
		HOLLYWOOD, FL 33021	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	ARZU YAVUZ	300 S LUNA CT, APT 5	<input type="checkbox"/> Add
		HOLLYWOOD, FL 33021	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

Please amend article III to Real Estate activities

Multiple horizontal lines for amending information.

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TALLAHASSEE, FL

E. Effective date, if other than the date of filing: 02/04/2022 (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) Note: 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 February 4th 2022

Handwritten signature: MAUREEN J. McCALICA

Signature of a member or authorized representative of a member

MAUREEN J. McCALICA

Typed or printed name of signee