119000257643

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COVER LETTER

Tallahassee, FL 32314

TO:	Registration Se Division of Cor			
cun iez		re is on , LLC		
SUBJEC	-1:	Name of Limi	ited Liability Company	
The encl	osed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please re	turn all correspo	ondence concerning this matter	to the following:	
		Jhoan A. Parra		
			Name of Person	
		The Pressure is on, LLC		
			Firm/Company	
		3090 SW Edwards Avenue	•	
			Address	
		Palm City, Florida 34990		
			City/State and Zip Code	
		jhoanparra.jp@gmail.com		7
			to be used for future annual report noti	neation)
For furth	er information c	oncerning this matter, please ca	all:	
Jhoan P	агта		561 507-6684	
	Name o	f Person	at () Area Code Daytim	e Telephone Number
Enclosed	d is a check for t	he 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 Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration		Street Address: Registration Se	ection
	Division of C	Corporations	Division of Cor	rporations
	P.O. Box 632	77	The Centre of T	Fallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

The Pressure Is On, LLC

2022 JUL 26 PH 3: 23

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) | FLLAF: The Articles of Organization for this Limited Liability Company were filed on 10/14/2019 __ and assigned Florida document number L19000257643 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." 3090 SW Edwards Avenue Enter new principal offices address, if applicable: Palm City, Florida 34990 (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: 3090 SW Edwards Avenue (Mailing address MAY BE A POST OFFICE BOX) Palm City, Florida 34990 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 City

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>	Name	Address	Type of Action
AR	John A. Coleman, IV	3550 SW 75th Avenue	□Add
		Palm City, Florida 34990	Remove
			□Change
	 		
			□Remove
			□ Change
			Change
			□Add
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			Change
			□Add
			□Remove
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			□ Add
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	effective date on the Department of State's records.	
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Filing Fee: \$25.00