L19000263322

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COVER LETTER

TO: Registration Section

porations		
ESTORATION TEAM LLC		
Name of Lin	nited Liability Company	
Amendment and fee(s) are sub	bmitted for filing.	
idence concerning this matter	r to the following:	
BILLY PHILIPPE		
· · · · · · · · · · · · · · · · · · ·	Name of Person	
CLEVER RESTORATIO	N TEAM LLC	
	Firm/Company	
4158 INVERRARY DRIV	/E STE 101	
	Address	
LAUDERHILL, FL 33319)	
	City/State and Zip Code	
E-mail address: (to be used for future annual report notification	ution)
ncerning this matter, please c	all:	
	754 423-4903	1 7
Person	Area Code Daytime T	elephone Number = 2
		24
following amount:		
☐ \$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)
ection rporations	<u>Street Address:</u> Registration Section Division of Corpo	rations
L 32314		
	ESTORATION TEAM LLC Name of Lin Amendment and fee(s) are substantial address of the substantial addres	Amendment and fee(s) are submitted for filing. Amendment and fee(s) are submitted for filing. Indence concerning this matter to the following: BILLY PHILIPPE Name of Person CLEVER RESTORATION TEAM LLC Firm/Company 4158 INVERRARY DRIVE STE 101 Address LAUDERHILL, FL 33319 City/State and Zip Code E-mail address: (to be used for future annual report notified necerning this matter, please call: Person Area Code Daytime T S 30.00 Filing Fee & Certified Copy (additional copy is enclosed) Street Address: Registration Section Prorations Registration Section Prorations Registration Section Division of Corponations The Centre of Tall

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CLEVER RESTORATION TEAM 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 11/01/2019 ____ and assigned Florida document number <u>L19000263322</u> 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." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (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 ___

• 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

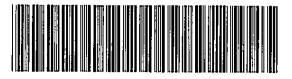
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	BILLY PHILIPPE	4158 INVERRARY DRIVE APT 101	■Add
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ffective date, if other than the an effective date is listed, the date must	st be specific and cannot be prior to date of filing	or more than 90 days after filing.) Pursu	ant to 605.0207
Sote: If the date inserted in this bl	lock does not meet the applicable statutory t	filing requirements, this date will n	ot be listed as
ocument's effective date on the D	repartment of State's records.		
d is filed.	re date, but not an effective time, at 12:01 a		day after the
MAY 26TH	2021 Philippe Signature of a intember or authorized representation		
11	01 15,000		

Typed or printed name of signee

L21000 116504

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
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(Bu	isiness Entity Nar	ne)
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07/07/21

COVER LETTER

TO:

Registration Section

Tallahassee, FL 32314

Divi	sion of Cor	porations				
cun ucer	Pinkaholics	Unite LLC		dr.		
SUBJECT:		Name of Lim	ited Liability Company	·		
The enclosed	Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return	all correspo	indence concerning this matter	to the following:			
		Frank De Jesus Feliz				
			Name of Person			
		Pinkaholics Unite				
			Firm/Company			
		1502 Jefferson Avenue, A	partment 205			
			Address			
		Miami Beach, Florida, 331	39			
			City/State and Zip Code			
		Pinkaholicsunite@gmail.co				_
			to be used for future annual re	port notification)	202	
For further in	formation c	oncerning this matter, please ca	ill:		 E .1	
Frank De Jest	us Feliz		305 8899 at ()	9056	7021 JUN -1	
	Name o	f Person	Area Code	Daytime Telephone Number		
Enclosed is a	eheck for th	ne following amount:			A 11: 2u	
■ \$25.00 Fi	ling Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	sed) Certified (of Status &	
	ing Addres istration S		<u>Street Add</u> Registrat	I <u>ress:</u> ion Section		
		orporations	Division	of Corporations		
r.O.	. Box 632	1	inc Cent	re of Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Pinkanones Unite LLC			
(Name of the Lim	ited Liability Compa (A Florida Limited	iny as it now appears on our reco Liability Company)	rds.)
The Articles of Organization for this Limited I Florida document number L21000116504	Liability Company	were filed on March 11, 2021	and assigned
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name of	of the limited liab	ility company here:	
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation "Li	.C" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	1680 Michigan Avenue	
(Principal office address MUST BE A STREA	ET ADDRESS)	Suite 700 #336	
		Miami Beach, FL, 33139	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	· POVI	1680 Michigan Avenue Suite 700 #336	
muning audress MAT BE AT OST OFFICE	BUAJ	Miami Beach, FL, 33139	
B. If amending the registered agent and/or agent and/or the new registered office addressed agent. Name of New Registered Agent:	registered office a ess here:	address on our records, <u>ente</u>	er the name of the new registere
Name of New Registered Agent.			
New Registered Office Address:	1680 Michigan	Avenue Suite 700 #336 Enter Florida street addr	7015
	Minni Da 1		
	Miami Beach	, I	Florida 33139

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

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
		46	□Add
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ote: If the date inserted in this block does not meet the application	able statutory filing requirements a	ter tiling.) Pursuant to 605.020 this date will not be listed a
ocument's effective date on the Department of State's records.		
e record specifies a delayed effective date, but no The 90th day after the record is filed.	t an effective time, at 12:01	l a.m. on the earlier o
The soul day after the record is filed.		
ated May 17 2021		
ited FIZI	_·	
Farah No bus	Vil.	
Signature of a member or autho	prized representative of a member	<u> </u>