19000273046

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Cenificates	s of Status
Special Instructions to	Filing Officer:	

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2020 MAR 25 AM (L' 4)

Y SULKER MAR 2 6 2020

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive Tallahassee, Florida 32312

(850) 656-4724

DATE 3/25/2020	
	WALK IN
ENTITY NAME WAVY	PINKCO LLC
DOCUMENT NUMBER	
	PLEASE FILE THE ATTACHED AND RETURN
xxxxxx	Plain Copy
	Certified Copy
	Certificate of Status
,	*PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY**
	Certified Copy of Arts & Amendments
	Certified Copy of Arts & Amendments Complete File (Including Annual Reports)
	Certificate of Status
	Certificate of Status Reflecting:
	APOSTILLE' / NOTARIAL CERTIFICATION
COUNTRY OF DESTINA	TION
NUMBER OF CERTIFICA	TES REQUESTED
TOTAL OWED \$ 25	ACCOUNT # 120160000072 4: C
Please call Tina at t	he above number for any issues or concerns. Thank you so much!

COVER LETTER

TO:

Registration Section

Division of Co	rporations		
Wavypink			
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Kara Bausch		
		Name of Person	
	ZenBusiness		
		Firm/Company	
	702 San Antonio St. 4th F	loor	
		Address	
	Austin, Texas, 78701		
	£ 1611	City/State and Zip Code	
	fulfillment@zenbusiness.co E-mail address: (on to be used for future annual report no	tification)
For further information	concerning this matter, please c	all:	
Kara Bausch		844 493-6249	
Name (of Person	at () Area Code Daytir	ne Telephone Number
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 Addre Registration Division of O P.O. Box 63	Section Corporations	Street Address: Registration Se Division of Co The Centre of	rporations
Tallahassee,			pe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Wavypinken LLC (Name of the Limited Liability Com-	sany as it now annears on our re	cards)
(Name of the Limited Liability Comp (A Florida Limited	I Liability Company)	<u></u>
The Articles of Organization for this Limited Liability Compan Florida document number <u>L19000273046</u> .	y were filed on 10/31/2019	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
The new name must be distinguishable and contain the words "Limited Lial	bility Company," the designation '	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	7557 W Sand Lake Rd # 1	219 Orlando, FL 32819
(Principal office address MUST BE A STREET ADDRESS)	·	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		2020 SEC
		AR 25
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	e address on our records, <u>er</u>	nter the name of the new registered
Name of New Registered Agent:		-
New Registered Office Address:	Enter Florida street ac	ldress
	, Florida	
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agen		
I hereby accept the appointment as registered agent and ag provisions of all statutes relative to the proper and complet accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered offic company has been notified in writing of this change.	te performance of my dutie. provided for in Chapter 6	s, and I am familiar with and 05, F.S. Or, if this document is

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
			□Add
			Remove
			□Change
			□Add
			Remove
			Change
			□ Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
		□Remove	
			□Change
			□Add
			□Remove
			□Change

ffective date, if other than the date of filing: (optional) 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 force: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as occument's effective date on the Department of State's records. 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 dis filed. March 24 2020 /s/ YILMARIE SANCHEZ RIVERA Signature of a member or authorized representative of a member YILMARIE SANCHEZ RIVERA				
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Filing Fee: \$25.00