## 119000297390

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(Address)	
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(Document Number)	
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## **COVER LETTER**

TO:

	legistration Se Pivision of Cor					
SUBJECT	PURPUSL'					
SUBJECT	Name of Limited Liability Company					
The enclos	sed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please retu	ım all correspo	ondence concerning this matter	to the following:			
		RICARDO BERRIS				
			Name of Person			
		BERRIS GROUP LLC				
		<del></del> -	Firm/Company			
		1325 NW 123RD TERR				
			Address			
		PEMBROKE PINES/FLO	RIDA 33026			
			City/State and Zip Code			
		ANA@THEBERRISGROU				
		E-mail address: (	to be used for future annual report notification)			
For further	r information c	oncerning this matter, please c	all:			
RICARDO	) BERRIS		786 266-9797			
	Name o	f Person	Area Code Daytime Telephone Number			
Enclosed i	s a check for th	ne following amount:				
<b>■</b> \$25,00	9 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & □ \$60.00 Filing Fee. Certified Copy (additional copy is enclosed) □ \$60.00 Filing Fee. Certificate of State Certified Copy (additional copy is enc			
	Sagistration		Street Address:			
	Registration S Division of C		Registration Section Division of Corporations			
P	O. Box 632	27	The Centre of Tallahassee			
T	allahassee, l	FL 32314	2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

202011.-9 /411:20 PURPUSLY 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 DECEMBER 05, 2019 and assigned Florida document number L19000297390 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.

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	ANA VAZQUEZ	1325 NW 123RD TERR	<b>=</b> Add
		PEMBROKE PINES, FLORIDA 33026	□ Remove
			Change
			Remove
			□ Change
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ective date, if other than the of effective date is listed, the date must te: If the date inserted in this bloomment's effective date on the Department.	ck does not meet the applicable	ate of filing or more than 90 day statutory filing requiremen	s after filing.) Pursuant to 605.020 is, this date will not be listed as
cord specifies a delayed effective s filed.	date, but not an effective time,	at 12:01 a.m. on the earlier	of: (b) The 90th day after the
ed FEBRUARY 23	2020		
	1	d representative of a member	

Typed or printed name of signee