## 120000006100

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## **COVER LETTER**

Division of Corp	orations		
SUBJECT: PCHE	Mame of Limited I	Liability Company	
	amendment and fee(s) are submitted		
Team of the second	Namibia Ma	•	
	Prettie Things	Firm/Company	
	PO Box 516	D (C) Address	
	Decified Bec ci Drettelhingz Glob E-mail address: no be	ity/State and Zip Code  OTAL & GWCul. COM  used for future annual report notif	ication)
For further information co	ncerning this matter, please call:		
Name of	Cullwiph Person	at ( <u>Q5U</u> ) <u>U Q · )</u> Area Code Daytimo	2 Telephone Number
Enclosed is a check for the	e following amount:		
□ \$25,00 Filing Fee	S30.00 Filing Fee & Certificate of Status	255.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)

TO: Registration Section

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

Division of Corporations

March 10, 2020

NAMIBRA MCCULLOUGH POST OFFICE BOX 5166 DEERFIELD BEACH, FL 33442

SUBJECT: PRETTIETHINGZ LLC Ref. Number: L20000008100

We have received your document and check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document must be signed by a member or an authorized representative of a member.

The name of the person signing the document must be typed or printed beneath or opposite the signature.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 620A00005316

Claretha Golden Regulatory Specialist II

www.sunbiz.org

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

trettie Things ILC		020149.23 AH 7:20
(Name of the Limited Liability Compa (A Florida Limited	iny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number (10000 800)	were filed on $ \left( \frac{1}{2} \right) \left( \frac{31}{31} \right) \left( \frac{9}{31} \right) $	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ifity company here:	
The new name must be distinguizable and contain the words "Limited Liabi		•
Enter new principal offices address, it applicable: (Principal office address MUST BE A STREET ADDRESS)	1155 W Al Gritic Blu Unit # 101 Pompone Beach, F	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the na</u>	ime of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florida	
	City	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 Agert

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 = A	uthorized Member	. Autoi alii	
<u>Title</u>	<u>Name</u>	Address J755 W AFWARE 151Va	Type of Action
MGR	Mamibia Maullough	Address J755 W Atknie Blvd Stc 101 Pompine Reall, FL 33069	BAGIT
			□Remove
			□Change
<u> 44</u>	Namibia Mcallough	1	□Add
			GRemove
			□Change
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			□ Add
			□Remove

aniendin 	g any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	I need to change my title to manager to open up my business bank account Please contact me if any other information is needed.
	up My business bank account Phase contact me
	if any other information is needed.
	Bost Regnids,
	Namibia McCyllour
	ancorati and
	<u>, , , , , , , , , , , , , , , , , , , </u>
n effectiv <mark>e</mark> <u>ite:</u> If the	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 date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as effective date on the Department of State's records.
ecord specis filed.	rifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
red <u>O</u>	3/14/2020
_	Signature of a member or authorized representative of a member
_	NCINIDICI MC (UIOUCM)  Typed or printed name of signee