Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H20000082801 3)))



H200000828013ABCV

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062

Phone : (323)962-8600

Fax Number

: (323)962-3889

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:	Emai	.1	Ad	dr	e	5	5	;
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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN THREE PINTS LLC

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Certificate of Status	0
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MAR 27 2020

TO:

## **COVER LETTER**

TO:	Registration Sec Division of Corp				
CHD IE/	THREE PIN				
SUBJE	CT:	Name of Limit	ed Liability Company		
The encl	losed Articles of .	Amendment and fec(s) are subn	nitted for filing.		
Please re	etum all correspo	ndence concerning this matter t	o the following:		
		Cheyenne Moseley			
			Name of Person		
Legalzoom.com, Inc.					
	Firm/Company				
	101 N Brand Blvd 11th Fl				
Address					
	Glendale, CA 91203				
		kim_hyunah@yahoo.com	City/State and Zip Code		
		E-mail address: (t	o be used for future annual report not	ification)	
For furt	her information e	oncerning this matter, please ca	II:		
Cheyenne Moseley		800 773-0888 at ()			
	Name o	f Person	at ()	ne Telephone Number	
Enclose	d is a check for the	he following amount:			
□ <b>\$</b> 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)	
		ING ADDRESS:	STREET/COUR Registration Section		

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limi	ted Liability Company as it now as (A Florida Limited Liability Compa	ppears on our records.)
	(A Florida Limited Liability Compa	any)
The Articles of Organization for this Limited L	iability Company were filed or	on 02/21/2020 and assigned
Florida document number L20000058621		
This amendment is submitted to amend the foll	owing:	
A. If amending name, enter the new name of	f the limited liability compar	ny 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 applic	cable:	2020 HAS
(Principal office address MUST BE A STREE	ET ADDRESS)	~
Enter new mailing address, if applicable:		
(Mailing uddress MAY BE A POST OFFICE	<u>BOX)</u>	
B. If amending the registered agent and registered agent and/or the new registered of	Vor registered office addres	ss on our records, enter the name of the new
Name of New Registered Agent:	Hyun Ah Perez	
New Registered Office Address:	8330 Vivaro Isle Way	
	Ente	er Florida street address
	Windermere	, Florida 34786
	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 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>	<u>Address</u>	Type of Action
AMBR	PEREZ, HYUN A	8330 VIVARO ISLE WAY	
		WINDERMERE, FL 34786	■ Remove
			Change
AMBR	Hyun Ah Perez	8330 VIVARO ISLIEWAY	■ Add
		WINDERMERE FL34786	□ Remove
			Change
			Add HAD Renewre
			Chage
			Встюче
			☐ Change
			Add
			Remove
			Change
			Add
			☐ Remove
			Change

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Typed or printed name of signee

Jose M Perez

Filing Fee: \$25.00