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To:

Division of Corporations

Fax Number : (850)617-6383

From:

<u>හ</u>

2021 HAR

: CORPORATE CREATIONS INTERNATIONAL INC. Account Name

Account Number : 110432003053 Phone

: (561)694-8107

Fax Number

: (561)214-8442

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

2mail	Address:	 	

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **OUTLANDS GROUP LLC.**

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MAR - 4.2021

M. SOLOMON

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Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

OUTLANDS GROUP LLC.						
(Name of the Limited Liabil (A Florid	lity Compan da Limited Li	y as it now appears on ability Company)	our records.)			
The Articles of Organization for this Limited Liability	Company v	vere filed on 01/21/	2021	and assigned	l	
Florida document number L21000016382	 `					
This amendment is submitted to amend the following:						
A. If amending name, enter the new name of the lin	nited liabil	ity company here:				
The new name must be distinguishable and contain the words "Li	mited Liabili	ty Company," the desig	nation "LLC" or the abb	previation "L.L.C."		
Enter new principal offices address, if applicable:		3323 NE 163rd St.			20	
(Principal office address MUST BE A STREET ADD)RFSS)	Suite 305			2021 MAR = 3 AMI	
(Frincipal office duaress most be ASINCEL 180	7112037	North Miami Beach	i, FL 33160		75	
				건물 남자	ယ်	
Enter new mailing address, if applicable:	no address, if applicable: 3323 NE 163rd St.		흪			
(Mailing address MAY BE A POST OFFICE BOX)		Suite 305		2.5 <u>7</u>	<u>Ö</u>	
		North Miami Beach	h. FL 33160	= .~	22	
B. If amending the registered agent and/or register agent and/or the new registered office address here Name of New Registered Agent: Con	:	ddress on our reco	rds, <u>enter the nam</u>	e of the new reg	istere	
901	US Highwa	v 1				
New Registered Office Address:			street address			
Nor	nh Palm Bea	ich	, Florida 33	4()8		
		City		Zip Code		
New Registered Agent's Signature, if changing Registe	red 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.

Lun

Lauren Underwood, Special Secretary

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
AMBR	PRET CONSULTING, LLC.	3323 NE 163rd St.	≣Add
		Suite 305	□ Remove
		North Miami Beach, FL 33160	☐ Change
AMBR	PRET CONSULTING, LLC.	3363 NE 163RD ST. SUITE 305	□Add
		NORTH MIAMI BEACH, FL 33160	Remove
			☐ Change
AMBR	Mondel Investments Inc	1160 Harbor Ct	■Add
		Hollywood, FL 33019	□Remove 28
			2021 HAA
			Add ⊕ A
			Remove 28
			Change
			□Add
			Remove
			☐ Change
			□Add
			Remove
			☐ Change

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Tective date, if other than the an effective date is listed, the date mus ote: If the date inserted in this blocument's effective date on the De	be specific and cannot be prior to date of filing ick does not meet the applicable statutory	(optional) g or more than 90 days after filing.) Pursuant to 605.020 y filing requirements, this date will not be listed as
ecord specifies a delayed effective is filed.	date, but not an effective time, at 12:01	a.m. on the earlier of: (b) The 90th day after the
March 3	2021	
arcu	,	
Lun		

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