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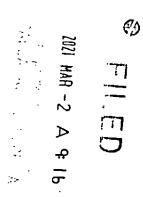
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| PICK-UP | ☐ WAIT | MAIL |
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| Certified Copies | _ Certificates | s of Status |
| Special Instructions to I | Filing Officer: | |
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4-23-2021 S.C.

COVER LETTER

| TO: Registration S Division of Co | | | | |
|--------------------------------------|----------------------------------|--|---|------------|
| SUBJECT: PRETTY | 24SVN LLC | | | |
| 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: | | |
| | K C | | | |
| | Kamry Samuel | Name of Person | | |
| | PRETTY 24SVN LLC | | | |
| | | Firm/Company | | |
| | 5840 RED BUG LAKE RO | DAD SUITE #1598 | | |
| | | Address | | |
| | WINTER SPRINGS FL. 3 | 2708 | | |
| | | City/State and Zip Code | | |
| | kamrysamuel@gmail.com | | | |
| | | to be used for future annual report noti | fication) | |
| For further information | concerning this matter, please c | all: | | |
| Kamry Samuel | | at (_954)639-6632 | | |
| Name (| of Person | Area Code Daytim | e Telephone Number | |
| Enclosed is a check for t | the following amount: | | | 69 |
| ■ \$25.00 Filing Fee | ☐ \$30.00 Filing Fee & | ☐ \$55.00 Filing Fee & | ☐ \$60.00 Filing Fee | 至 门 |
| 2 January Timig Fee | Certificate of Status | Certified Copy (additional copy is enclosed) | Certificate of Sta Certified Copy (additional copy is e | nttis & .— |
| | | | · • | , O |
| Mailing Addre | 14.15.1 | Street Address: | . 6 | • |
| Registration | | Registration Sec | ction | |
| Division of C | | Division of Cor | | |
| P.O. Box 63: | 27 | The Centre of T | • | |
| Tallahassee, | FL 32314 | 2415 N. Monro Tallahassee, FL | e Street, Suite 810 . 32303 | |

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| PREITY 248VN LLC | |
|---|---|
| (<u>Name of the Limited Liability Compa</u> (A Florida Limited I | ny as it now appears on our records.) Liability Company) |
| The Articles of Organization for this Limited Liability Company Florida document number <u>L2100040741</u> . | were filed on 01/21/2021 and assigned |
| This amendment is submitted to amend the following: | |
| A. If amending name, <u>enter the new name of the limited liab</u> | allity company here: |
| The new name must be distinguishable and contain the words "Limited Liabil | lity 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 a agent and/or the new registered office address here: | address on our records, <u>enter the name of the new reg</u> i |
| Name of New Registered Agent: | 200 |
| New Registered Office Address: | Enter Florida street address |
| | City Florida No. Code 111 |
| New Registered Agent's Signature, if changing Registered Agent: | |
| I hereby accept the appointment as registered agent and agra | vee to act in this capacity. I further agree comply wi |

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 | Kamry Samuel | 5840 RED BUG LAKE ROAD SUITE #1598. WINTER SPRINGS FL. 32708 | = Add |
| | | | □Remove |
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| ive date, if other than the date of fill ective date is listed, the date must be specific: | ing; and cannot be prior to date of | tiling or more than 90 days afte | юпа()- , |
| If the date inserted in this block does not tent's effective date on the Department of | | utory filing requirements, th | is date will not be liste |
| iem serieenve date on the Department of | 1 State 3 records. | | |
| d specifies a delayed effective date, but r | not an officitive time, at 1 | 2.01 a.m. on the earlier of: (| 5) The O0th day atte |
| led. | ioi an encenve ume, ai i | 2.01 a.m. on the carner or. (| 7) The 90th day after |
| | | | |
| February 15 | 2021 | | |
| Karry Samul Signature of | <u> </u> | | |
| Kanvy Damul | J | | |
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