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•	Florida Department of State Division of Corporations Electronic Filing Cover Shedt	dit number
	(shown below) on the top and bottom of all pages of the documen (((H21000357237 3))) H210003572373ABC/	
	Note: DO NOT hit the REFRESH/RELOAD button on your browser from Doing so will generate another cover sheet. To: Division of Corporations Fax Number : (850)617-6383 From: Account Name : SORSHER & ASSOCIATES, LLC. Account Number : I20170000056 Phone : (954)842-2931 Fax Number : (954)842-2936 **Enter the email address for this business entity to be used for annual report mailings. Enter only one email address please. Email Address:	FILED -2021 SEP 23 PH 1: 18 SEGRETARY OF STATE -FALLAHASSEE, FLORIDA future
2021 SEP 23 PM 1: 444	LLC AMND/RESTATE/CORRECT OR M/MG RESIG PURUS LLC Certificate of Status 0 Certified Copy 0 Page Count 05 Estimated Charge \$25.00	SEP 2 4 2021 S. PRATHER

COVER LETTER

TO;	Registration Section
	Division of Corporations

PURUS LLC

SUBJECT:

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ZORINA, NATALIA

Name of Person

PURUS ELC

Firm/Company

15\$11 COLLINS AVE 3503

Address

SUNNY ISLES BEACH, FL 33160

City/State and Zip Code

PURUSELC1@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ZORINA, NATALIA 754 236-4467 _________at (_____) _______Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

🗐 \$25.00 Filing Fee

S30.00 Filing Fee & Certificate of Status

Certified Copy (additional copy is enclosed)

\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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

ARTICLES OF AMENDMENT TO **ARTICLES OF ORGANIZATION OF**

	ТО	2021 SEC
ARTICLES OF	ORGANIZATION	
	OF	SEP 23
		SS SS
PURUS LLC		
(Name of the Limited Lightlity Con (A Floridu Limite	npany as it now appears on our	records.)
(A Honda Limite	cd Eability Company)	LOFTA
The Articles of Organization for this Limited Liability Compa	ny were filed on 01/29/2021	
Florida document number 1.21000053405		and msigned
This amendment is submitted to amend the following:		
A If amending some enter the new some of the Party state	1.11%	
A. If amending name, enter the new name of the limited li	ability company here:	
The new name must be distinguishable and contain the words "Limited Liz	ability 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)		
	<u>_</u>	·
Enter new mailing address, if applicable:	<u> </u>	
(Muiling address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered offic	e address on our records, g	enter the name of the new registered
agent and/or the new registered office address here:		
Name of New Registered Agent:		
Now Durietand Office Address		
New Registered Office Address:	Enter Florida street	address
	Ċılv	_, Florida Zip Code
	C 14.4	zip Coue

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 compony has been notified in writing of this change.

If Changing Registered Agunt, 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

Title	Name	Address	Type of Action
MGR	20RINA, NATALIA	15811 COLLINS AVE APT 3503	■ Add
		SUNNY ISLES BEACH, FL 33160	
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			🗆 Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Num creative due 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 (3)(b) <u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed,

Dated		ALLAHA	3021 SE	
	Natalia Zorina Signature of a member or authorized representative of a member	ASSEE	P 23	
ZORINA, NATALIA		, FLOR	PM I:	0
	Typed or printed name of signee		8	