L21000074794

(Requestor's Name)	
(Address)	9003
(Address) (City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	04/06.
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COVER LETTER

Registration Section
Division of Corporations

TO:

The best of	Allega en Dec L.J. C		• •
THE LINE COR	t Happen Pro LLC		<u> </u>
	Name of Lim	ited Liability Company	
cı	A d d & (-)	missed for filling	
	Amendment and fee(s) are sub		
Please return all correspo	indence concerning this matter	to the following:	
	Marie Bruce		
		Name of Person	
		Firm/Company	
	2100 NE 33rd Street, Apt	208	
		Address	
	Fort Lauderdale, FL 3330	5	
		City/State and Zip Code	
	themakeithappenpro@gmai	Leom to be used for future annual report noti	fication)
For further information c	oncerning this matter, please o	•	,
Marie Bruce		786 3140168 at ()	
Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$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
Mailing Address		Street Address:	ction
Registration S Division of C		Registration Se Division of Cor	
P.O. Box 632	-	The Centre of T	•
Tallahassee, l	FL 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Make It Happen Pro LLC				
(Name of the Limi	ted Liability Compa (A Florida Limited	iny as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited L	iability Company	were filed on 02/12/2021	and assigned	
Florida document number L21000074794				
his amendment is submitted to amend the foll	owing:			
A. If amending name, enter the new name o	f the limited liab	ility company here:		
he new name must be distinguishable and contain the v	vords "Limited Liabi	lity Company," the designation "LLC" or the	abbreviation "L.L.C."	
Enter new principal offices address, if applicable:		2100 NE 33rd Street, Apt 208		
(Principal office address MUST BE A STREET ADDRESS)		Fort Lauderdale, FL 33305		
nter new mailing address, if applicable:		2100 NE 33rd Street, Apt 208		
(Mailing address MAY BE A POST OFFICE BOX)		Fort Lauderdale, FL 33305		
3. If amending the registered agent and/or agent and/or the new registered office addre	~	address on our records, enter the na	me of the new regist	
Name of New Registered Agent:	Marie Bruce		· · ·	
New Registered Office Address:	2100 NE 33rd S	Street, Apt 208		
		Enter Florida street address	33305	
	Fort Lauderdale	, Florida	33305	
		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>	Address	Type of Action
AMBR	Malik Bruce	2100 NE 33rd Street, Apt 208	
		Fort Lauderdale, FL 33305	□ Remove
			□Change
			□Add
			Remove
			Change
·			□ Add
			Remove
			□Add
			□ Remove
			Change
			
			□ Remove
			Change
			
			□ Remove
			Change

			
			
fective date, if other than th	e date of filing:		(optional)
on effective date is listed, the date municipal of the date inserted in this b	ist be specific and cannot be pri lock does not meet the appl	or to date of filing or more than 90 icable statutory filing requirer	days after filing.) Pursuant to 605.0207 nents, this date will not be listed as
cument's effective date on the E	Department of State's record	is.	
record specifies a delayed effecti is filed.	ve date, but not an effective	time, at 12:01 a.m. on the ear	lier of: (b) The 90th day after the
April 3rd	2021		
	Marie	thorized representative of a memb	
	I / W/W I /	1000gn	

Typed or printed name of signee