2021-05-20 22:11:01 GMT

18882140633

From: Yanelle Barinas

5/20/2021

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : BARINAS & ASSOCIATES INC.

Account Number : I20000300082 Phone

: (305)871-0889

Fax Number

: (305)870-9623

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

Email Address:_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN PURIPURI FUNNY SEA LLC

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From: Yanelie Barinas

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COVER LETTER

TO:	Registration Section Division of Corporations				
	PURIPURI FUNNY SEA LLC				
SUBJE	ECT:				
		Name of Limi	ted Liability Company		
The en	closed Articles of a	Amendment and fee(s) are subi	nitted for filing.		
Please	return all correspo	ndence concerning this matter t	to the following:		
		YANELLE M BARINAS			
			Name of Person		
		BARINAS & ASSOCIAT	ES, INC.		
			Firm/Company		
		5701 NW 36 ST			
			Address		
		VIRGINIA GARDENS,	FL 33166		
			City/State and Zip Code		
		BARINASB@GMAIL.COM			
		E-mail address: (t	o be used for future annual report notif	ication)	
For für	rther information co	oncerning this matter, please ea	all:		
YANE	LLE M BARINAS	S	305 871-0889		
			at () Area Code Daytime	T. J Lance Normalism	
	Name o	f Person	Area Code Dayune	Tetephone Number	
Enclos	sed is a check for th	ne following amount:			
□ \$2	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:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Ff. 32304 Page: 6 of 8

2021-05-20 22.11:01 GMT

18882140633

From: Yanella Barinas

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PURIPURI FUNNY SEA LLC			FILED HAY 21 PH CORE) ARY OF CAHASSEE.
(Name of the Limite	d Liability Compa	ny ay it now appears on our records.) Liability Company)	SS 21
The Articles of Organization for this Limited Li Florida document number	ability Company	n3/04/2021	HAY 21 PM 6: 17 CAHA SSEE, GROUNDA LAHA SSEE, GROUNDA AND SSEE GR
This amendment is submitted to amend the folk	owing.		
A. If amending name, enter the new name of	the limited liab	ility company here:	
The new name must be distinguishable and contain the w	ords Limited Liabi	hty Company," the designation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applic	able:	<u></u>	
(Principal office address MUST BE A STREE			
(Principal office daaress of CST BE A STREE	T AIMMESSY		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE	<u>BOX)</u>		
B. If amending the registered agent and registered agent and/or the new registered o	or registered (office address on our records. <u>ente</u> r <u>e</u> :	r the name of the new
Name of New Registered Agent: 1100 S MIAMI AVE APT 2704			
		AMI AVE APT 2704	
New Registered Office Address:		EnterFloridastreetaddress	
	MIAMI	. Florida	33130
		City	ZipCode

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.

HUMBERTO I FIGUERA

If Changing Registered Agent, Signature of New Registered Agent

From: Yanelle Barinas

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trainenumg Authorized rerson(s) authorized to manage, enter the title, name, and address of each person-being added or removed from our records:

2021-05-20 22:11:01 GMT

MGR =	Manager	
AMBR =	Authorized	Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	HUMBERTO JOSE FIGUERA	1100 S MIAMI AVE APT 2704	⊠ Add
		MIAMI, FL 33130	
			Remove
			☐ Change
MGR	HUMBERTO J FIGUERA M	1100 S MIAMI AVE APT 2704	Add
		MIAMI, FL 33130	
			■ Remove
			Change
			Remove
			Change
			Add
			☐ Remove
			Change
			Add
			☐ Remove
			Change
			Remove
			Change

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DocuSign Envelope li	D: 808B9D0F-7065-4C35-88C8-847 ng any other information, em	^{76D82EC1F3} ter change(s) here: (Attach additio	nal sheets, if necessary.)	
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es esee d'	date, if other than the date o	5/19/2021	(optional)	
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(5)				
Dated				
	Signatu	HUMBERTO J FIGUERA are of a member or authorized representative	e of a member	
	HUMBERTO J FIGUERA			ΓΑ: 21
		Typed or printed name of signee	<u> </u>	
		Page 3 of 3		FILED 2021 MAY 21 PH SECRETARY OF AULAHASSEE, F
		Filing Fee: \$25.00		E PH