121000179461

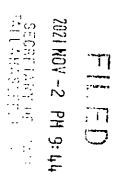
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
J. HORNE
NOV 1 2 2021

Office Use Only



000375811540

11.402/21--01014--019 *+25.00



COVER LETTER

TO:	Registration Sec Division of Corp		. •	
SUBJE	:cт: <u>Р</u> се	2+14 Little 1 Name of Lim	Homes LLC ited Liability Company	
The en	closed Articles of A	amendment and fee(s) are sub	mitted for filing.	
Please	return all correspon	dence concerning this matter	to the following:	
			Annette E Solis Name of Person	
		Prett	4 Little Homes 1	LC
		<u>322 Ha</u>	1Stead Dr Address	
			lenfort FL 3389 City/State and Zip Code	
		e-mail address: (to be used for future annual report notifi	eation)
For fur	ther information co	ncerning this matter, please ca	all:	
	Annette Name of	E Solis Person		9 - 69 89 Telephone Number
Enclose	ed is a check for the	following amount:		
½ \$2.	5.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy tadditional copy is enclosed)	☐ \$60,00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Se		Street Address: Registration Sect	ion

Registration Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

FILED

2021 NOY -2 PM 9:45

SECRETARY OF 5 To 1

Pretty	Little Homes L	LC SECRETARY OF SITE
(A Florida	y Company as it now appears on or Limited Liability Company)	ur_records.)
The Articles of Organization for this Limited Liability Co Florida document number <u>L21000179401</u>		19-2021 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit Pretty Little Pro The new name must be distinguishable and contain the words "Limit	•	ion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR	<u>ESS)</u>	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our record	s, enter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida str	vet address
		, Florida
	Cĩn	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 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>	Name	Address	Type of Action
			□Add
			□Remove
			□Change
			□Remove
			🗆 Change
			□Add
			□Remove
			□Change
			□Add
		.	□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

_	
_	
_	
_	
_	
-	
n effec <u>ite:</u> - [the date, if other than the date of filing: 10 20 202 (optional) 11 20 202 (optional) 12 30 202 (optional) 13 4 30 202 (optional) 14 5 4 5 5 6 5 7 6 7 7 8 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9
ecord is tile	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
ted _	Signature of a member or authorized representative of a member
	Signature of anaphret of authorized expression to a member
	Anne Ma (>>)15

Filing Fee: \$25.00