121000321710

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Ĉit	ry/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



400370580764

2021 JUL 28 PM 4: 50

D BRUCE

• COVER LETTER

TO: Registration Section Division of Corpo					
SUBJECT: Pret	ti Taylor! Name of Lim	ited Liability Company			
The enclosed Articles of Ar	mendment and fee(s) are sub	mitted for filing.			
Please return all correspond	lence concerning this matter	to the following:			
	Sharavia	HUDE (+ Name of Person			
		Firm/Company			
	425 nu	884 Lerr Address			
	miami, F	City/State and Zip Code	<u></u>		
	Pre Hitaylor	docmail . Com to be used for future annual report notific	cation)	(; E)	3
For further information con	cerning this matter, please ca				2021 111 22
Shatavia	Hubert	at (443) 626-	4409		ລ . -
Name of P		Area Code Daytime	Telephone Number	<u>.</u>	PH 1: 50
Enclosed is a check for the \$25.00 Filing Fee	□ \$30.00 Filing Fee &	☐ \$55.00 Filing Fee &	☐ \$60.00 Filin	u Fee	
≥ \$25,00 Filing Fee	Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate Certified Co (additional co	of Status a	
Mailing Address:		Street Address:			

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO:

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

FCER Lumber

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

D ... Tal 10/110

Pretti laylor U C	<u> </u>					
(Name of the Limited Liability (A Florida	Company as it no Limited Liability Co	ompany)	recorus.)			
		1	110.00			
The Articles of Organization for this Limited Liability Co	ompany were file	ed on <u></u> + / / 7	1000	and	i assign	ed
Florida document number 4210003217	10					
This amendment is submitted to amend the following:						
A. If amending name, enter the new name of the limit	ted liability com	ipany here:				
The new name must be distinguishable and contain the words "Limit	ted Liability Compa	nv," the designatio	n "LLC" or the ab	oreviation	n "L.L.C.	
Enter new principal offices address, if applicable:					20	
(Principal office address MUST BE A STREET ADDRI	 FSS)			<u> </u>		
(1 Incipal office dualess MOST DE A STREET ADDITION				 	,==:	
				5.	တ	
				<u> </u>	70	
Enter new mailing address, if applicable:				-:	<u> </u>	
(Mailing address MAY BE A POST OFFICE BOX)					C.F.	
			<u>.</u>	1.3		
B. If amending the registered agent and/or registered	office address	on our records,	enter the nam	e of the	new re	gistered
agent and/or the new registered office address here:						
Name of New Registered Agent:			<u> </u>			
New Registered Office Address:			·· ······			
-		Enter Florida street	t address			
			Florida			
	Ciņ			Zip Ci	ode	

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

Title	<u>Name</u>	Address	Type of Action
MGR	Petithomme, Dickevens		_ SAdd
	Petithonne, Dickever	miami, Fl 33161	□Remove
			Change
mur	Hubert, Shatqia	425 nw 88+2 terr	_ SAdd
		miami, F1 33150	□Remove
			□Change
			□Add
			□Remove
			□ Cli ange
			Add :
			_ □Rémove □
			∵ S □Ehange
			□Remove
			Change
			□Add
			□Remove
			□Change

					-
			<u></u> .	· · · · · · · · · · · · · · · · · · ·	-
					-
					_
					-
					_
					_
			·		_
<u> </u>					,
				A 1707	5 3
				L A	<u>≅</u>
				سو د	ρ P
				(7),	π :: :π
				r £	-
ffective date, if other than the date of file an effective date is listed, the date must be specific tote: If the date inserted in this block does not occument's effective date on the Department of	and cannot be prior to of meet the applicab	date of filing or more	than 90 days after filu	ng.) Pursuant to 60:	5.0207 ted as
record specifies a delayed effective date, but the filed.	not an effective time	e. at 12:01 a.m. on	he earlier of: (b)	The 90th day afte	er the
erical .		. •			
1. Helet					