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3/24/22, 12:49 PM

Division of Corporations



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(((H22000109390 3)))



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To:	Division of Cor Fax Number			
	Fax Number	•	(850)617-6383	
From:				
	Account Name	;	LEGALZOOM.COM	INC.
	Account Number	:	120010000062	
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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Help

COVER LETTER

		· · · · ·	JUVER LETTER	*
TO:	Registration Se Division of Cor			
		SCUS LLC		
SUBJ	ECT:	Name of Limi	ted Liability Company	
The er	iclosed Articles of	Amendment and fee(s) are subr	nitted for filing.	
Please	return all correspo	ndence concerning this matter t	o the following:	
		Cheyenne Moseley		
			Name of Person	
		Legalzeom.com, Inc.		
			Fim/Company	
		101 N Brand Blvd 11th Fl		
			Address	
		Glendale, CA 91203		
			City/State and Zip Code	n —
		rebeccabrisbois@gmail.com	o be used for future annual report n	oritication
Car fr	they information a			
		oncerning this matter, please ca		
Cheye	enne Moseley	······································	800 773-0888	ime Telephone Number
	Name o	f Person	Area Code Dayı	ime l'éléphone ivuniser
Enclo	sed is a check for t	he 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)
	Regist Divisio P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 assee, FL 32314	STREET/COU Registration Sec Division of Corp Clifton Building 2661 Executive Tallahassee, FL	corations Center Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compa (A Florida Limited I	Liability Company)		
The Articles of Organization for this Limited Liability Company	were filed on 09/20/2021	and assigned	
Florida document number 1.21000414865			
This amendment is submitted to amend the following:			
A. If amonding name, enter the new name of the limited liab	ility company here:		
Pink Pincapple Home Watch LLC			
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the	e abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	919 Sundrop Ct.		
(Principal office address MUST BE A STREET ADDRESS)	SS) Marco Island, Florida 34145		
Enter new mailing address, if applicable:	919 Sundrop Ct.		
Enter new maning audress, in applicable.	Marco Island, Florida 34145		
(Mailing address MAY BE A POST OFFICE BOX)	Marco Island, i fonda 34145		

Name of New Registered Agent:			122 MA	>
New Registered Office Address:			R 24	FIL
	Enter Florida street address		PH	ED UVE
	, Florida _ City	Zip C	<u>ంగం</u> ఎగం	C

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

2022-03-24 10:51:59 PDT

LegalZoom.com, Inc.

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
AMBR	Rebecca G Brisbois		🗆 Add
			Remove
		919 Sundrop Ct. Marco Island, Horida 34145	🔚 Change
AMBR	Robert Brisbois		🖸 Add
			🗆 Remove
		919 Sundrop Ct. Marco Island, Florida 34145	Change
			DAdd
			🗌 Кеточе
			Change
			🛛 Add
			Remove
			Change
			O Add
			Remove
			П Снапде
			🖸 Add
			C Remove
			Change

To:	+18506176383	,	

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

E. Effective date, if other than the date of filing: _______(optional) (If an effective date 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)(h) Note: 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	3-16-2.2.
	(B) A B
	Signature of a member or authorized representative of a member

Rebecca G Brisbois

Typed or printed name of signce

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Filing Fee: \$25.00