## 121000478498

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Y. SCOTT FEB 1 9 2022

## **COVER LETTER**

TO:	Registration Sec Division of Corp			<b>;</b>			
	om DUDAVI	DA CADINE LI C		•			
SUBJI	ECT: PURA VIDA CABINS, LLC  Name of Limited Liability Company						
The en	closed Articles of	Amendment and fcc(s) are sub	mitted for filing.				
Please	return all correspo	ndence concerning this matter	to the following:				
		Corpor	ate Maintenance Lea	ad			
			Name of Person				
		Proc	essing Department				
			Firm/Company	· · · · · · · · · · · · · · · · · · ·			
			1450 Vassar St	SEC SEC	2022	1	
		·-··	Address	2022 FEB	ألك		
	Reno, NV 89502						
			City/State and Zip Code	Code CT C			
	E-mail address: (to be used for future annual report notification)						
For fu	rther information c	oncerning this matter, please o	all:				
	Process	ing Department	at (800 ) 638-2320				
	Name o	f Person		Telephone Number			
Enclos	sed is a check for th	ne following amount:					
☑ \$2	5.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Fil Certificat Certified (additional)	e of Sta Copy	atus &	
	Registr	ING ADDRESS: ation Section	STREET/COURI Registration Section	n			

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PURA VIDA	CABINS, LLC	
( <u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records Liability Company)	ע
The Articles of Organization for this Limited Liability Company lorida document number <u>L21000478498</u> .	were filed on 11/04/21	and assigned
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
PURA VIDA CABINS AND RE		
The new name must be distinguishable and contain the words "Limited Liabi"	lity Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)	) )	SFC 2022
Enter new mailing address, if applicable:  Mailing address MAY BE A POST OFFICE BOX)	LLAHASSEE, FL	TARY OF S
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her		, <u>enter the name of th</u>
Name of New Registered Agent:	<u> </u>	
New Registered Office Address:		
	Enter Florida street address	ï
		orida
	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 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	<u>Address</u>	Type of Action
MGR	Brian Denton	30907 Summer Sun Loop	
		Wesley Chapel, FL 33545	Remove
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ote: If the date inse	ed, the date must be sperted in this block didate on the Departi	oes not me	et the applic	able statutory	g or more than 90.	days after filing nents, this dat	g.) Pursu e will no	ant to 605.0 of be listed
record specifie The 90th day at	es a delayed effo fter the record i	ective da s filed.	te, but no	t an effect	ive time, at	12:01 a.m	. on th	e earlier
ted <u>Jan</u>	31	<u> </u>	2022	·				
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