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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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2022 APR -4 AH 7: 41
SECRETARY OF STATE
TALLAHASSEE

O SIMMONS O = APR 15 2022 APR 15 2021

COVER LETTER

TO: Registration So Division of Cor			
Perfectly B	diss Productions LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing	
	ondence concerning this matter		
	Peter Baron		
		Name of Person	
	Perfectly Bliss Productions	SLLC	
		Firm/Company	
	9160 Forum Corporate Par	kway Suite 350	
		Address	
	Fort Myers Florida 33905		
		City/State and Zip Code	
	Perfectlyblissproductionsllc	=	
For further information of	E-mail address: (concerning this matter, please c	to be used for future annual report not all:	ification)
Peter Baron		720 723-9962	
Name (of Person	at ()	ne Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	□ \$30,00 Filing Fee & Certificate of Status	S55,00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing Addre</u> Registration		Street Address: Registration So	ection
Division of C	Corporations	Division of Co	rporations
P.O. Box 632		The Centre of	
Tallahassee,	rl. 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT FILED TO ARTICLES OF ORGANIZATIONAPR -4 AH 7: 42 OF TO STATE

SECRETARY OF STATE TALLAHASSEE, FL

Perfectly Bliss Productions LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited L	iability Company	were filed on $01/1$	9/2022	and assigned
Florida document number L22000035835				
This amendment is submitted to amend the following	owing:			
A. If amending name, enter the new name of	f the limited liab	ility company her	<u>ne</u> :	
The new name must be distinguishable and contain the w	ords "Limited Liabil	ity Company," the de-	signation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applic	able:	9160 Forum Corp	porate Parkway Suite 3:	50 Fort Myers
(Principal office address MUST BE A STREET ADDRESS)		FL 33905		
		-		-
Enter new mailing address, if applicable:		9160 Forum Corp	oorate Parkway Suite 3:	50 Fort Myers
(Mailing address MAY BE A POST OFFICE	BOX)	FL 33905		
B. If amending the registered agent and/or ragent and/or the new registered office address		nddress on our re	cords, <u>enter the nam</u>	e of the new registered
Name of New Registered Agent:	Registered Age	nts Inc.		
New Registered Office Address:	7901 4th St N,	STE 300		
	Enter Florida street address			
	St. Petersburg		, Florida 33	702
		Ciţy		Zip Code
New Registered Agent's Signature, if changing F	Registered Agent:			
I hereby accept the appointment as registere provisions of all statutes relative to the prop- accept the obligations of my position as regi- being filed to merely reflect a change in the company has been notified in writing of this	er and complete stered agent as p registered office	performance of n provided for in Cl	ny duties, and I am f hapter 605, F.S. Or,	amiliar with and if this document is

If Changing Registered Agent, Signature of New Registered Agent

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 = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			☐ Change
			□Remove
			□Change
			□Add
			□Remove
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Effect	ive date, if other than the date of filing: (optional)
~,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(optional) lective 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 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as
if an cil	
lfan ell <u>Note:</u>	tent's effective date on the Department of State's records.
If an eff Note: docum	tent's effective date on the Department of State's records.
if an eff Note: docum	d 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
If an eff Note: docum	d 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
If an eff Note: docum e recor rd is fil	d 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
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If an efficient of the second	d 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 led.

Filing Fee: \$25.00