Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H220002354163)))



H220002354163ABCZ

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : INCFILE.COM LLC
Account Number : I20220000070
Phone : (888)462-3453
Fax Number : (877)919-2613

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: EFILE1234@INCFILE.COM

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN PROJECT VILLAGE RECORDS & RECORDINGS LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

T. LEMIEUX!

ښ

Tallahassee, FL 32314

Page: 2/5 (((H22000235416 3)))

COVER LETTER

TO: Registration So Division of Cor			4
arres arcorp.		CORDS & RECORDINGS LLC	
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	LOVETTE DOBSON		
		Name of Person	
		Firm/Company	
	17350 STATE HWY 249 9	STE 220	
		Address	
	HOUSTON, TX 77064		
	EPILE1234@INCFILE.CO	City/State and Zip Code M to be used for future annual report noti	(Tealion)
For further information c	concerning this matter, please of		
LOVETTE DOBSON		1 8884623453	
Name c	of Person	at () Area Code Dayrim	ne Telephone Number
Enclosed 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)
Mailing Addre		<u>Street Address:</u> Registration Sc	ction
Registration Division of C		Division of Cor	rporations
P.O. Box 633		The Centre of T	Fallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

(((H22000235416 3)))

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PROJECT VILLAGE RECO			
(Name of the Limited Liability Compa (A Fforda Limited	any as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited Liability Company Florida document number $\frac{1.22000106510}{1.0000106510}$.	were filed on 03/01/2022 and assigned		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	offity company here:		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company." the designation "LLC" or the abbreviation "L.L.C."		
•	1150 Nw 72nd Ave Tower I Ste 455 #7095		
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	Miami, FL 33126		
the state of the s			
Enter new mailing address, if applicable:	F150 Nw 72nd Ave Tower I Ste 455 #7095		
(Mailing address MAY BE A POST OFFICE BOX)	Miami, FL 33126		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the name of the new registere		
Name of New Registered Agent:			
New Registered Office Address:	2022 35 c		
	Enter Florida street address		
	, Florida 30 - N		
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am familiar wath and provided for in Chapter 605, F.S. Or, if this document is		
If Cha	noing Registered Agent, Signature of New Registered Agent		

Page: 4/5

□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:

(((H22000235416 3)))

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Ivan Tucker	1150 Nw 72nd Ave Tower I Ste 455 #7095	□Add
		Miami, FL 33126	□Remove
			Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			FlAdd
			□Remove
			□Change
			□Add
			LIRemove
			□Change
			□JAdd
			□Remove

		-		
			1-1-1-1	
				
				
···				
	 			
Iffective date, if other than the defeate must be some of the date must be some of the date must be some on the deciment's effective date on the Department's effective date on the Department.	ck does not meet the ar	oplicable statutory f	(option more than 90 days after thing requirements, this	o nal) filing.) Pursuant to 605,0207 date will not be listed as
record specifies a delayed effective d is filed.	date, but not an effecti	ve time, at 12:01 a.	m, on the earlier of: (b) The 90th day after the
IULY U	. 2022	·		
Pated				
Luan Tucker	ignature of a member or	authorized representa	tive of a member	

Filing Fee: \$25.00 (((H22000235416.3)))