## 

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Special Instructions to Filing Officer:





06/26/23--01015--016 \*\*25.00



## **COVER LETTER**

TO:

TO: Registration Se Division of Cor	ction porations		•	•
, PIRPLET	DOOR 1106 LLC	on The state of the state of th	•	
SUBJECT: PURPLE L		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:		
	Stephanie Harris			
		Name of Person		
		Firm/Company		
•	1551 Forum Place, 300E			
•		Address		
	West Palm Beach, FL 3340			د د
	pdpropertiespb@gmail.com	City/State and Zip Code		· • • • • • • • • • • • • • • • • • • •
	· · · · · · · · · · · · · · · · · · ·	to be used for future annual report notif	ication)	55,
For further information e	oncerning this matter, please ca	all:		
Stephanie Harris		at (561 ) 721-6484	<u></u>	
Name o	f Person	Area Code Daytimo	e Telephone Number	• • •
Enclosed is a check for the	ne following amount:			
■ \$25,00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Certificate of Certified Co (additional cop	of Status &
Mailing Addres		Street Address:		
Registration : Division of C		Registration Sec Division of Cor-		
P.O. Box 632	-	The Centre of T	-	
Tallahassee,	FL 32314	2415 N. Monroe	e Street, Suite 810	)

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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

PURPLE DOOR 1106 LLC

and assigned
<u>·e</u> :
signation "LLC" or the abbreviation "L.L.C."
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cords, <u>enter the name of the new register</u>
da street address
, Florida Zip Code
7.φ Ολικ
apacity. I further agree to comply with th ny duties, and I am familiar with and hapter 605, F.S. Or, if this document is v confirm that the limited liability

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 = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Stephanie Harris	1551 Forum Place, 300E	
		West Palm Beach, FL 33401	□Remove
			□Change
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			Remove
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effective da e: If the d	te, if other than ate is listed, the dat date inserted in the frective date on t	e must be specifi vis block does t	e and cannot be not meet the ap	plicable statute	ling or more than	(option 90 days after irements, this	filing.) Purs	uant to 605,020 not be listed a
	fies a delayed eff	fective date, but	t not an effecti	ve time, at 12:	)1 a.m. on the	earlier of: (b	) The 90th	h day after the
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s filed.	6		XAY	· ·				•
cord specil s filed. ed June 10	6							
s filed.	6	Signature	) a rember or	authorized repre	sentative of a m	ember		