

H210000872583
Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : CORPORATE CREATIONS INTERNATIONAL INC.
Account Number : 110432003053
Phone : (561)694-8107
Fax Number : (561)214-8442

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

Email Address: _____

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
OUTLANDS GROUP LLC.**

Certificate of Status	0
Certified Copy	0
Page Count	04
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MAR - 4 2021

M. SOLOMON

2021 MAR - 3 AM 10:28
FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

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2021 MAR - 3 PH 3:08

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

OUTLANDS GROUP 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 Liability Company were filed on 01/21/2021 and assigned Florida document number L21000016382

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability 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)

3323 NE 163rd St. Suite 305 North Miami Beach, FL 33160

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

3323 NE 163rd St. Suite 305 North Miami Beach, FL 33160

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B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: Corporate Creations Network Inc.

New Registered Office Address: 801 US Highway 1 Enter Florida street address

North Palm Beach, Florida 33408 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.

Lauren Underwood, Special Secretary 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>	<u>Address</u>	<u>Type of Action</u>
AMBR	PRET CONSULTING, LLC.	3323 NE 163rd St.	<input checked="" type="checkbox"/> Add
		Suite 305	<input type="checkbox"/> Remove
		North Miami Beach, FL 33160	<input type="checkbox"/> Change
AMBR	PRET CONSULTING, LLC.	3363 NE 163RD ST, SUITE 305	<input type="checkbox"/> Add
		NORTH MIAMI BEACH, FL 33160	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Mondel Investments Inc	1160 Harbor Ct	<input checked="" type="checkbox"/> Add
		Hollywood, FL 33019	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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