A08000000415

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number))
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
2		

Office Use Only



400454839514

CSC - Tallahassee
CSC 1201 Hays Street
Tallahassee, FL 32301-2607
850-558-1500, Ext: x61563

To: Department Of State, Division Of Corporations

From: Shauna Godbolt

Ext: x61563 Date: 07/11/25 Order #: 3966298-1

Re: Pizarro Investment Holdings, Ltd.

Processing Method: Routine

Please honor the original sent date, if this was rejected TO WHOM IT MAY CONCERN: please resend us the rejection, original date sent was 7/11

Enclosed please find:

Amount to be deducted from our State Account: \$52.50 - FL State Account Number: I20000000195

Please take the following action: File in your office on basis

Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filling, please call our office.

FILED

CERTIFICATE OF AMENDMENT TO 2025 JUL 11 AM 9: 47 CERTIFICATE OF LIMITED PARTNERSHIP OF STATE

Dizarra Inve	ostmont Hol	dings I to
Pizarro Inve		
Pursuant to the provisions of section 620.1202, Flimited liability limited partnership, whose certif April 3, 2008, assigned Floadopts the following certificate of amendment to	icate was filed orida documen	with the Florida Department of State on t numberA0800000415,
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the here:	limited partner	ship or limited liability limited partnership
Pizarro Investm	ent Holding	s, LLLP
New name must be distinguis	hable and contain	an acceptable suffix.
Acceptable Limited Partnership suffixes: Limited Partners Acceptable Limited Liability Limited Partnership suffixes:		
B. If amending mailing address and/or principal office address here:	ipal office add	ress, enter new mailing address and/or
New Principal Office Address:		
(Must be STREET address)		
New Mailing Address:		· · · · · · · · · · · · · · · · · · ·
(May be post office box)		
C. If amending the registered agent and/or register registered agent and/or the new registered office ac		ss on our records, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter	Florida street address
		. Florida
	City	, rionda 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.

<u>tle</u>	<u>Name</u>	Address	Type of Action
			Remove
			Remove
			□ D
			CD DO
			☐ Remove
			
			s amending its "limited

			
Affective date, if other than the date Effective date cannot be prior to nor more tate.) Tote: If the date inserted in this block does	re than 90 days after the		
e listed as the document's effective date			erra, and date with not
ignature(s) of a general partner	or all general par	tners*:	
NOTE: Only one current general partne			ted partnershin is adding or
moving a "limited liability limited partn hen adding or removing a "limited liabil	ership" election statem	ent. Chapter 620, F.S., requ	
SP: Pizarro Investment Manage			
Florida limited liability compar	<u>1y</u>		
tota Utymon-		Olga Pizario (Jul 10, 2025 to 4) ED	π;
Pedro Pizarro, Co-Manager	r	Olga Pizarı	ro, Co-Manager
			2025 .
ignature(s) of all new or dissocia	ating general parti	ner(s), if any:	
			第 二
·			79 2
			35 3
 			
Filing Fee:	\$52.50		