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### **COVER LETTER**

TO:

SURTECT	PG163 ST			
SOBJEC I	·		nited Liability Company	
The enclos	sed Articles of	Amendment and fee(s) are sul	bmitted for filing	
			Ç	
		Leslie Alan Rozenewaig,	Esq.	
			Name of Person	
	Division of Corporations  PG163 STUDIO LLC  Name of Limited Liability Company  enclosed Articles of Amendment and Rects) are submitted for filing.  see return all correspondence concerning this matter to the following:  Leslic Alan Rozenewaig, Esq.  Name of Person  Rozenewaig & Nadel, LLP  Firm Company  301 W. Hallandale Beach Blvd  Address  Hallandale Beach, Florida 33009  City/State and Zip Code entities@rmflaw.com  E-mail address: to be used for future annual report notification)  further information concerning this matter, please call:  lie Alan Rozenewaig, Esq.  Name of Person  Name of Person  Area Code  Daytime Telephone Number  S25.00 Filing Fee  Certificate of Status  Certificat Copy radditional copy is enclosed:  Mailing Address:  Street Address:			
			Firm/Company	
	Division of Corporations PG163 STUDIO LLC  Name of Limited Liability Company  PG163 STUDIO LLC  Name of Limited Liability Company  enclosed Articles of Amendment and fee(s) are submitted for filing.  se return all correspondence concerning this matter to the following:  Leslie Alan Rozenewaig, Esq.  Name of Person  Rozenewaig & Nadel, LLP  Firm-Company  301 W. Hallandale Beach Blvd  Address  Hallandale Beach, Florida 33009  City/State and Zip Code entities@mflaw.com  E-mail address: to be used for future annual report notification)  uirther information concerning this matter, please call:  ie Alan Rozenewaig, Esq.  Name of Person  4 (455-5100)  Daytime Telephone Number  psed is a check for the following amount:  S25.00 Filing Fee  Certificate of Status  Certificate Copy radditional copy is enclosed  Mailling Address: Registration Section Division of Corporations P.O. Box 6327  The Centre of Tallahassee			
			Address	□ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)  Section orporations Tallahassee
		Hallandale Beach, Florida	33009	
			City/State and Zip Code	
		E-mail address: (	to be used for future annual report noti	fication)
For further	information c	oncerning this matter, please c	all:	
Leslie Alai	n Rozencwaig	, Esq.		
	Name o	l'Person	Area Code Daytime	e Telephone Number
inclosed is	a check for th	ne following amount:		
<b>■</b> \$25,00	Filing Fee		Certified Copy	Certificate of Status & Certified Copy
	_			
	allahassee, F			ananassee Street Suite 810

Tallahassee, FL 32303

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PG163 STUDIO LLC					
(Name of the Lim	ited Liability Cor (A Florida Limit	mpany as it now appears on o ted Liability Company)	ur records.)		
The Articles of Organization for this Limited I	_iability Compa	any were filed on 03/14/20	014	_ and assig	aned
Florida document number L14000043143				_ `	-
This amendment is submitted to amend the fol	lowing:				
A. If amending name, enter the new name of	of the limited li	iability company here:			
N/A					
The new name must be distinguishable and contain the	words "Limited Li	ability Company," the designa-	tion "LLC" or the abbre	viation "L.L	.C."
Enter new principal offices address, if appli	cable:	N/A			
(Principal office address MUST BE A STRE	<u>ET ADDRESS)</u>	<u> </u>			
				021	
				SE	17
Enter new mailing address, if applicable:		N/A		2	
Mailing address MAY BE A POST OFFICE	BOX)			371	- Ti
				· -	
B. If amending the registered agent and/or in agent and/or the new registered office addresses	registered offic ss here:	ce address on our record	s, enter the name o	f the new	registere
Name of New Registered Agent:	N/A			<del></del>	
New Registered Office Address:					
<del>-</del>		Enter Florida stre	et address		
			, Florida _		
	<del></del>	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.

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	HANNAH GRUSZKA	19416 PRESIDENTIAL WAY	<b>≣</b> Add
		MIAMI, FL 33179	_
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Effective date, if other than the	date of filing:		,		
fan effective date is listed, the date must Note: If the date inserted in this blo document's effective date on the De	t be specific and cannot be ock does not meet the ar	inticable statistici	But the property them 00 december	optional) after filing.) Pursuant to a this date will not be l	605.0207 ( listed as (
record specifies a delayed effective d is filed.	e date, but not an effecti	ve time, at 12:01	a.m. on the earlier of	f: (b) The 90th day a	fter the
Dated September 21	2021				
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	Signature of a member or a	unboriend access			
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