## LZZ 000 512 943

(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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## COVER LETTER

ne of Limited Liability Company
) are submitted for filing.
s matter to the following:
Name of Person
RO PA
Firm/Company
ND RD 300
Address
L 33324
City/State and Zip Code
AVARROPA.COM
address: (to be used for future annual report notification)
please call:
954 445-7401 at ()
Area Code Daytime Telephone Number
tatus  Certified Copy (additional copy is enclosed)  \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Street Address: Registration Section
Division of Corporations
The Centre of Tallahassee 2415 N. Monroe 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.) (A Florida Limited Liability Company)  The Articles of Organization for this Limited Liability Company were filed on 12/06/2022 and assign Florida document number 122000512943  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)  Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered office address here:  Name of New Registered Agent:	ATM/ LLC			
Florida document number L22000512943  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 "LLC Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)  Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office address on our records, enter the name of the new regent and/or the new registered office address here:	(Name of the Limited Li (A Fl	ıbility Company aş it now apportus. Ortus Limited Liability Company	ears on our records.) y)	
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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)  Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office address on our records, enter the name of the new regent and/or the new registered office address here:		<u>;</u>		
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Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office address on our records, enter the name of the new regent and/or the new registered office address here:	The new name must be distinguishable and contain the words	Limited Liability Company," the	ne designation "LLC" or the abbreviation "L.	L.C."
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered and/or the new registered office address here:	Enter new principal offices address, if applicable:			
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Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office address on our records, enter the name of the new reagent and/or the new registered office address here:				
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agent and/or the new registered office address here:	Mailing address MAY BE A POST OFFICE BOX	<u> </u>		
agent and/or the new registered office address here:				
Name of New Registered Agent:			r records, <u>enter the name of the nev</u>	<u>v register</u>
	Name of New Registered Agent:			
New Registered Office Address:  Enter Florida street address	New Registered Office Address:		the state of the s	
Enter Plorida street address		Enter F	ioriaa street address	
	<del></del>			

## 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
AMBR	PMI MANAGEMENT GROUP LL	8 THE GREEN STE A	
	DOVER DE 19901	≣Remove	
			Change
AMBR	REVOCABLE LIVING TRUST OF	1500 NW 89 CT	<b>=</b> Add
	ATM7	SUITE 209	□Remove
		DORAL FL 33172	Change
		□Remove	
		□Change	
			□Add
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	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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	ve date, if other than the date of filing: (optional)
Note:	extive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as
	ent's effective date on the Department of State's records.
e record rd is fil	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
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Dated	1/19/2023
Jaicu ,	· · · · · · · · · · · · · · · · · · ·
	Signature of a member or authorized representative of a member
	Typed or printed name of signee