

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : R&P ACCOUNTING AND TAXES INC

Account Number : I20170000090 Phone

: (305)358-1310

Fax Number

(305)503-6701

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

Email Address: <u>Avox8723</u>

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN PACIFICO CAPITAL LLC

Certificate of Status	0
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Page Count	04
Estimated Charge	\$25.00

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2019-04-25 14:37:41 (GMT)	13055036/01	i⊬rema: An	dres Rodngi	4
ARTICLES OF AMENDMENT TO RTICLES OF ORGANIZATION OF PACIFICO CAPITAL LLC		APR 25 PM 12: 12		
I Imited I inhility Company of it new annuals on our encord	<u> </u>			

(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 04/02/2018 Florida document number L18000081061	and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new mame of the limited liability company here:	
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applicable: 305 NE 1ST STREET	
(Principal office address MUST BE A STREET ADDRESS) MIAMI, FL 33132	
	·
Enter new mailing address, if applicable: 305 NE IST STREET	
(Mailing address MAY BE A POST OFFICE BOX) MIAMI, FL 33132	
B. If amending the registered agent and/or registered office address on our records, enter t registered agent and/or the new registered office address here: Name of New Registered Agent:	he name of the
New Registered Office Address:	
Enter Florida street address	
, Florida	
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 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 = M $AMBR = A$	anager utborized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			
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