L040000 45431

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COVER LETTER

	Registration Division of	r Section Corporations		
ern re		ystems LLC		
SUBJEC	.1:	Name of Lin	nited Liability Company	
The enclo	osed Articles	s of Amendment and fee(s) are sul	bmitted for filing.	
Please re	turn all corre	espondence concerning this matter	r to the following:	
		Ana M Veliz		
			Name of Person	
		Ana. M. V	eliz, PA Firm/Company	
		2100 Pon	ce de Leon Bly	d, Penthase 2
		Coral Ga	bles DL 33134 City/State and Zip Code	
				hap veliz law. com
For furth	er informatio	on concerning this matter, please of	call:	
Ana M \	√eliz		at (305) 250 - Area Code Daytine	9917
	Nar	ne of Person	Area Code Daytime	· Telephone Number
Enclosed	l is a check f	or the following amount:		
⊠ [*] \$25.0	00 Filing Fee	© \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, F1, 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PIVIS Systems LLC			
(Name of the Limi	ted Liability Company as it now (A Florida Limited Liability Con	appears on our records.) npany)	
The Articles of Organization for this Limited L Florida document number L04000045431	iability Company were filed	on 06/17/2004	and assigned
This amendment is submitted to amend the fol	owing:		
A. If amending name, enter the new name of	of the limited liability comp	eany here;	
The new name must be distinguishable and contain the	words "Limited Liability Compan	y." the designation "LLC" or the abl	previation "L.L.C."
Enter new principal offices address, if applied	cable:	······································	\$6 1 8
(Principal office address MUST BE A STREE	ET ADDRESS)		<u> </u>
			12: PAR
		····	
Enter new mailing address, if applicable:			200 C
(Mailing address MAY BE A POST OFFICE			<u> </u>
Andring dadress MAI DE AT OST WITTEL	<u></u>		- 01 - 7 -
B. If amending the registered agent and registered agent and/or the new registered of	-	ress on our records, enter	the name of the ne
Name of New Registered Agent:	Ana M. Veliz, Esq.		
New Registered Office Address:	2100 Ponce de Leon Bo	oulevard PH2	
The Magnetice of the Manage.	E	nter Florida street address	
	Coral Gables	Planta 33	134

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.

City

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>	Name	Address	Type of Action
AMBR	Mariella Gutierrez	1104 Windoor Drive	= Add
		McKinney, Tx 75072	Remove
			Change
AMBR	Pedro Gutierrez	1104 Windsor Drive	
		1104 Windsor Drive Mckinney, Tx 75072	Remove
			Change
			☐ Remove
			Change
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ective date, if other than the c	ate of filing	, •			(optional)	
effective date is listed, the date must te: If the date inserted in this blo	se specific and	cannot be prior t	o date of filing or ble statutory fil	more than 90 day	/s after filing.) Purs	uant to 605.0
rument's effective date on the De				2 (
record specifies a delayed	effective d	late, but not	an effective	e time, at 12	:01 a.m. on t	he earlie
the 90th day after the reco		210, 201 1101				
ed June 19		2018				
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Filing Fee: \$25.00