

L05000051406

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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FILED  
09 MAY 19 PM 3:35  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
2009 MAY 19 AM 10:46  
NOT INTENDED  
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B. KOHR

MAY 19 2009

EXAMINER



CORPORATION SERVICE COMPANY

PP22

ACCOUNT NO. : I20000000195

REFERENCE : 999305 81390A

AUTHORIZATION

COST LIMIT : \$77.50

ORDER DATE : May 19, 2009

ORDER TIME : 10:31 AM

ORDER NO. : 999305-020

CUSTOMER NO: 81390A

FILED  
09 MAY 19 PM 3:35  
TALLAHASSEE, FLORIDA

DOMESTIC AMENDMENT FILING

NAME: PCU INVESTMENTS, LLC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT  
       RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY  
       PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: *Snair*  
~~Unassigned~~ -- EXT# *2956*

EXAMINER'S INITIALS: \_\_\_\_\_

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

PCU INVESTMENTS, LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

FILED  
09 MAY 19 PM 3:35  
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on May 23, 2005 and assigned  
Florida document number L05000051406

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 end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

2340 So. Dixie Highway

**(Principal office address MUST BE A STREET ADDRESS)**

Miami, Florida 33133

Enter new mailing address, if applicable:

2340 So. Dixie Highway

**(Mailing address MAY BE A POST OFFICE BOX)**

Miami, Florida 33133

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

Alfredo G. Duran, Esq.

New Registered Office Address:

2340 So. Dixie Highway

*(Enter Florida street address)*

Miami

*(City)*

Florida

33133

*(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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
Managing Member	Hector Catalan	2340 So. Dixie Highway Miami, Florida 33133	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Dated \_\_\_\_\_, \_\_\_\_\_

\_\_\_\_\_  
 /s/ HECTOR CATALAN  
 Signature of a member or authorized representative of a member

\_\_\_\_\_  
 Hector Catalan  
 Typed or printed name of signee