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	(Requestor's Name)	
	(Address)	
	(Address)	
	(City/State/Zip/Phone #)	
PICK-UF	P WAIT MAIL	
	(Business Entity Name)	
	(Document Number)	
Certified Copies	Certificates of Status	
Special Instructions to Filing Officer:		
	Office Use Only	



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## COVER LETTER &

TO: Registration Sec Division of Corp			<i>y</i>
SUBJECT:	PBC Northwin	ited Liability Company	
The enclosed Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	<u>Natha</u>	Name of Person	
	Palm Beac	h Cajoital, LLC Firm/Company	<u></u> .
	505 B. Flo	rgler Dr. Suit	e 1550
	West Pal	eu Beach FL City/State and Zip Code	33401
•	S 9a 94 (0 E-mail address: (1	Oph Cap. Com to be used for future annual report notifi	eation)
For further information co	oncerning this matter, please ca	all:	
Name of	Person	at (561) 659. Area Code Daytime	- <u>9022</u> × 104 Telephone Number
Enclosed is a check for th	e following amount:		
\$25.00 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, FL 32301

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

FILED 2015 JUN 30 AM 8: 10 SECRETARY OF STATE

	TALLAHASSEE, FLORIDA
PBC Northwine	x LLC
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Ciability Company)
	100/000
The Articles of Organization for this Limited Liability Company	were filed on $\frac{11/28/2005}{}$ and assigned
Florida document number <u>L 05000113633</u> .	,
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
N/A	
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	N/A
(Principal office address MUST BE A STREET ADDRESS)	
(Frincipal office duaress MUST BE A STREET ADDRESS)	<u> </u>
Enter new mailing address, if applicable:	N/A
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her	
registered agent and/or the new registered office address ner	<u>c</u> .
	NI /A
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street 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 Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized	to manage,	enter the title,	name, and	address o	<u>f each per</u> :	son being	added
or removed from our records:		·					

MGR = M AMBR = A	anager uthorized Member	
Title	Name	Address

<u>Title</u>	Name	Address	Type of Action
<u> 1GR</u>	Victor Balestra	3135 SW. Third Avenue Miam FL, 3312	i KAdd
		,	□ Remove
			Change
<del></del>			
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Note:	ive date, if other than the date of filing: \(\frac{\f	0207 (3)(1 d as the
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlie 90th day after the record is filed.	er of:
Dated	Signature of a number or authorized representative of a member	
	Pate In Land	

Page 3 of 3

Filing Fee: \$25.00