L06000059523

(Requestor's Name)	
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PICK-UP WAIT MAI	L
(Business Entity Name)	
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SECRETARY OF STATE
JALLAHASSEE FLORIDA

COVER LETTER

TO:	Registration Sec Division of Corp				
SUBJE	CT:	Р	B7, LLC		
			ted Liability Company		
The end	closed Articles of A	Amendment and fee(s) are sub	mitted for filing.		
Please	return all correspor	ndence concerning this matter	to the following:		
	Henry A. Lopez-Aguiar, Esq			·	_
			Name of Person		
		Hen	ry A. Lopez-Aguiar, P.A.		_
			Firm/Company		_
		941	5 Sunset Drive Ste 119		
			Address		-
			Miami, Fl 33173		
			City/State and Zip Code		_
E-mail address: (to be used for future annual report notification)					
For fur	ther information co	oncerning this matter, please c	all:		
	Dan	iela Reboso	at (_305)	598-2208	
Name of Person			ytime Telephone Numb	er	
Enclos	ed is a check for th	e following amount:			
▼ \$25	5.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclo	Certificosed) Certific	iling Fee, ate of Status & ad Copy anal copy is enclosed)
MAILING ADDRESS:		STREET/COL	URIER ADDRESS:		

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



	PB7, LLC	,	SSEE FLORIDA
(Name of the Limited Liabil) (A Florid	ity Company as it now appea la Limited Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Liability	Company were filed on	06/9/2006	and assigned
Florida document number L06000059523			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the li	mited liability company he	<u>re</u> :	
The new name must be distinguishable and end with the vull.L.C."	vords "Limited Liability Comp	any," the designation "	LLC" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET AD	DRESS)		
Enter new mailing address, if applicable:	<u> </u>		
(Mailing address MAY BE A POST OFFICE BOX)		·	
			
B. If amending the registered agent and/or regregistered agent and/or the new registered office a		our records, enter	the name of the nev
Name of New Registered Agent:		<u> </u>	
New Registered Office Address:	Fr	nter Florida street add	Iress
	Li		
_	City	, Florida	7in 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>Address</u> **Type of Action** Title <u>Name</u> MGR Julio Guanche 19540 NW 88 Ave, Miami, FL 33018 Remove Rolando Sanchez-Medina MGR 60 Edgewater Drive Remove Coral Gables, FL 33133 ☐ Add Remove \bigcap Add Remove ∏Add Remove \square Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated _____August 12 2009 Signature of a prember of authorized representative of a member Pyped or printed name of signee

Page 2 of 2

Filing Fee: \$25.00