1 A. CB C. C. A.	
(Requestor's Name)	
(Address) (Address)	000334940550
(City/State/Zip/Phone #)	
(Business Entity Name) (Document Number) Certified Copies Certificates of Status	10/02/1901022021 **25.00
Special Instructions to Filing Officer:	2019 CCT -2 PH 5: 39
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	Registration Se Division of Cor			
STED HEZY		RICAN VENTURES, LLC		
SUBJEC	.1:	Name of Lim	ited Liability Company	
The enclo	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please ret	turn all correspo	ondence concerning this matter	to the following:	
		STEVEN LLERANDI		
			Name of Person	
		PAN AMERICAN VENT	URES, LLC	
			Firm/Company	
		1075 SHOTGUN ROAD		
		<u> </u>	Address	
		SUNRISE, FL 33326		
		Steven.Llerandi@Panamml	City/State and Zip Code st.com	
		E-mail address: (to be used for future annual report not	ification)
⁷ or furthe	er information c	oncerning this matter, please ca	all:	
STEVEN	LLERANDI		786 512-4962	
	Name o	f Person	Area Code Daytin	ne Telephone Number
Enclosed	is a check for th	e following amount:		
■ \$25.0	0 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed
	Registr Divisio P.O. Bo	ING ADDRESS: ation Section n of Corporations ox 6327 ssee, FL 32314	STREET/COUR Registration Secti- Division of Corpo Clifton Building 2661 Executive Co Tallahassee, FL 32	on orations enter Circle

TO ARTICLES OF ORGANIZATION	
OF	
PAN AMERICAN VENTURES, LLC	
(<u>Name of the Limited Liability Company as it now appears on our records.</u>) (A Florida Limited Liability Company)	
The Articles of Organization for this Limited Liability Company were filed on December 3, 2007 and Florida document number 1.07000120242	and assigned
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 contain the words "Limited Liability Company," the designation "LLC" or the abbrevia	tions L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
	11/2
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office address on our records, <u>enter the</u> registered agent and/or the new registered office address here:	<u>name_of_the_new</u>

Name of New Registered Agent:	STEVEN LLERANDI	
New Registered Office Address:	1075 SHOTGUN ROAD	
	Ente	r Florida street address
	SUNRISE	, Florida ³³³²⁶
	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 mercly 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 thanging Registered Agent, Signature of New Registered Agent

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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

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<u>Name</u>	Address	<u>Type of Action</u>
BARRY FRIEDMAN	1531 BLUE JAY CIRCLE WESTON, FL 33327	D Add
		E Remove
	 _	Change
CONSUELO FRIEDMAN	1531 BLUE JAY CIRCLE WESTON, FL 33327	Add
		Remove
		Change
STEVEN LLERANDI	1075 SHOTGUN ROAD SUNRISE, FL 33326	🛱 🗛 dd
		Remove
	·	C Change
		Add
		Remove
		Change
	·····	🗆 Add
		Remove
		Change
		Add
		Change
	BARRY FRIEDMAN	BARRY FRIEDMAN 1531 BLUE JAY CIRCLE WESTON, FL 33327 CONSUELO FRIEDMAN 1531 BLUE JAY CIRCLE WESTON, FL 33327 STEVEN LLERANDI 1075 SHOTGUN ROAD

	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
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(If an effect <u>Note:</u> 1	e date, if other than the date of filing:(optional) tive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 6 "the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be li it's effective date on the Department of State's records.	
	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the ear 10th day after the record is filed.	lier
(b) The 9	9/27 2019	
(b) The 9	9/27 2019	
(b) The 9	9/27 . 2019 Signature of a member or authorized representative of a member	
(b) The 9		

Filing Eee: \$25.00.