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Office Use Only



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COVER LETTER

TO: Registration Sec Division of Corp						
SUBJECT: Piiuan V	SUBJECT: Pijuan Video Security LLC					
SUBJECT:	(Name of Limited Liability Company)					
The enclosed Articles of A	mendment and fee(s) are sub-	mitted for filing.				
Please return all correspondence concerning this matter to the following:						
Lourdes Arredondo						
(Name of Person)						
SoBe Consulting Services LLC						
(Firm/Company)						
2700 Collins Ave Suite 307						
(Address)						
Miami Beach, FL 33140						
(City/State and Zip Code)						
For further information concerning this matter, please call:						
Lourdes Arredondo		at (786) 348-1167				
(Name of Person) (Area Code & Daytime Telephone Number)						
Enclosed is a check for the 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

Pijuan Video Security LLC			
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.)		
The Articles of Organization for this Limited Liability Company	were filed on 06/20/2008	and assigned	
Florida document number L08000061551			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company here:		
The new name must be distinguishable and end with the words "Lim" L.L.C."	ited Liability Company," the designation	"LLC" or the abbreviation	
Enter new principal offices address, if applicable:	2700 Collins Ave Suite 307		
(Principal office address MUST BE A STREET ADDRESS)	Miami Beach, FL 33140		
Enter new mailing address, if applicable:			
(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		r the name of the new	
Name of New Registered Agent:		<u> </u>	
New Registered Office Address:	(D. D. A.		
	(Enter Florida street d	address) 🖟 🔚	
	, Florida,	The Date of the Code of the Co	
New Registered Agent's Signature, if changing Registered Agent:	• • • • • • • • • • • • • • • • • • • •	C ((Zip Gode))	
New Acelsteien Agent's Signature, II changing Registered Agent:		∃g 91	

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

Type of Action Title Name **Address** MGR Joaquin Pijuan **■** Add 2655 Collins Ave # 2411 Remove Miami Beach, FL 33140 MGR Lourdes G. Arredondo 2700 Collins Ave #307 Add Add Remove Miami Beach, FL 33140 Add 🗂 Remove MbA 🗂 Remove ☐ Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated September 2nd Signature of a member or authorized representative of a member Joaquin Pijuan Typed or printed name of signee

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Filing Fee: \$25.00