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K. SALY EXAMINER SEP 2 0 2011

COVER LETTER

Division of Co	orporations				
SUBJECT:	PAS	SECO, LLC			
	Name of Lim	ited Liability Company	-		
The enclosed Articles o	f Amendment and fee(s) are su	bmitted for filing.			
Please return all corresp	condence concerning this matte	r to the following:			
		Donald C. Pasek, Jr.			
	<u> </u>	Name of Person	·		
	PASECO, LLC				
Firm/Company					
	205 SE 12th Avenue				
		Address			
	Cape Coral, FL 33990				
		City/State and Zip Code			
	E-mail address: (pase27@yahoo.com to be used for future annual repo	ort notification)		
For further information	concerning this matter, please	call:			
Dona	ald C. Pasek, Jr.	at (239)	707-9434		
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 er	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		

MAILING ADDRESS:

TO:

Registration Section

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 11 SEP 19 PM 2: 25

	PASECO, LLC	1/3(1.)	TALL WEDDEN
(Name of the Limited Liz (A Flo	ability Company as it now appear orida Limited Liability Company)	rs on our records.)	MASSEE, FLONDA
Ç	, , , , , , , , , , , , , , , , , , ,		
The Articles of Organization for this Limited Liabi	lity Company were filed on	9/12/2011	and assigned
Florida document numberL1100010377	<u>"9 </u>		
This amendment is submitted to amend the following	ng:		
A. If amending name, enter the new name of the	e limited liability company he	<u>re</u> :	
The new name must be distinguishable and end with the "L.L.C."	ne words "Limited Liability Compa	any," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applicable	e:		
(Principal office address MUST BE A STREET A	(DDRESS)		
	 		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BO	<u>X)</u>		
D. If amonding the registered agent and/on-	mariatawad affica addusas on a	our records onto 4	na nama of the na
B. If amending the registered agent and/or registered agent and/or the new registered office		our recorus, <u>enter ti</u>	ne name of the ne
Name of New Registered Agent:			
New Registered Office Address:			
	En	ter Florida street addr	ess
		, Florida	
_	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 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 **Title Name** Address **Type of Action** MGRM Stacey M. Pasek 205 SE 12th Avenue ☐ Add ✓ Remove Cape Coral, FL 33990 ☐ Add Remove ☐ Add Remove ∏ ∧dd Remove □Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) September 14 2011 Dated Signature of a member or authorized representative of a member

Typed or printed name of signee

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Donald C. Pasek, Jr.

Filing Fee: \$25.00