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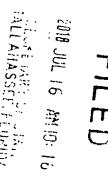
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COVER LETTER

TO: Registration S Division of Co			
	LLC, a Florida limited liabilit	y company	
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Consuelo C. Fernandez	. Esq.	
	-	Name of Person	
	Law Office of Consuelo	C. Fernandez, P.A.	
		Firm/Company	
	9360 Sunset Drive, Suit	e 256	
		Address	
	Miami, FL 33173		
		City/State and Zip Code	
	ccf@lawofcfernandez.co	m to be used for future annual report notif	icaton)
For further information of	concerning this matter, please c	·	(Calavir)
Consuelo C. Fernande	ez, Eşq.	305 443-2088	
Name (of Person	at ()	Telephone Number
Enclosed is a check for t	he following amount:		
S25.00 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

PAVALA, LLC, a Florida limited liability company

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\frac{05/25/2012}{1}$ _ and assigned Florida document number L12000071312 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 abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 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, enter the na registered agent and/or the new registered office address here: Name of New Registered Agent: 9360 Sunset Drive, Suite 256 New Registered Office Address: Enter Florida street address

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.

City

Miami

If Changing Registered Agent, Signature of New Registered Agent

. Florida ³³¹⁷³

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

Title	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	ANGELA PRADA	6651 NW 107 COURT	∃ Add
		DORAL, FL 33178	☐ Remove
			☐ Change
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			□ Remove
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ffective date, if other than the date of filing:	(optional)
f an effective date is listed, the date must be specific and cannot be prior to Note: If the date inserted in this block does not meet the applicab	o date of filing of more than 90 days after filing.) Pursuant to 605.02 ble statutory filing requirements, this date will not be listed
locument's effective date on the Department of State's records.	
e record specifies a delayed effective date, but not	an effective time, at 12:01 a.m. on the earlier
The 90th day after the record is filed.	,
Consuelo C. Fernandez, Esq. for PAVALA, LLC, a	
	<u>-</u> '

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00