L13000019650

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TO:

Registration Section

- Division of Corporations

SUBJECT

PINEAPPLE HOMESTEAD INVESTMENTS, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

AURORA PENALVER, ESQ.

Name of Person

PEÑALVER & PEÑALVER, P.A.

Firm/Company

2655 LeJeune Rd., Suite 508

Address

Coral Gables, FL 33134

City/State and Zip Code

napenalverlaw@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Nicole Armijo

____ a

905,579-9000

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 2013 AUG -2 PM 3: 19 **OF**

SECHETARY OF STATES IFALL'AHASSEE, FLORIDA

FILED

PINEAPPLE HOMESTEAD INVESTMENTS, LLC

(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 2/06/2013 and assigned Florida document number L13000019650					
This amendment is submitted to amend the follo	wing:				
A. If amending name, enter the new name of	the limited liabil	ty company here:			
The new name must be distinguishable and end with "L.L.C."	the words "Limite	d Liability Company," th	e designation "LLC	" or the abbreviation	
Enter new principal offices address, if applica	ıble:				
(Principal office address MUST BE A STREET	T ADDRESS)			. <u>.</u>	
Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE E	<u>30X)</u>				
B. If amending the registered agent and/or registered agent and/or the new registered off	_		ecords, <u>enter the</u>	name of the new	
Name of New Registered Agent:	Name of New Registered Agent: Peñalver & Peñalver, P.A.				
New Registered Office Address:	2655 La Journa Del Quita 509				
	Enter Florida street address				
	Coral Gable	s	, Florida <u>3313</u>	34	
		City		Zip Code	
N					

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 the Chapter 608, F.S. On if this document is being filed to merely reflect a change in the registered office address, thereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

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 = Ma $MGRM = M$	MGR = Manager MGRM = Managing Member				
<u>Title</u>	<u>Name</u>	Address	Type of Action		
			Add		
			Remove		
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D. If anie	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
• _	
_	
_	
-	
Dated	July 30, 2/0/3.
	- Atriare Develor
	Signature of a member or authorized representative of a member
	AURORA PENALVÉR/INCORPORATOR/REGISTERED AGENT
	Typed or printed name of signee

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Filing Fee: \$25.00

2019 AUG -2 PM 3: