Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H15000145925 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019

: (305)552-5973

fax Number

: (305)675-5944

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:			

LLC AMND/RESTATE/CORRECT OR M/MG RESIG

PYL, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

JUN 1 6 2015

S MASON

#4216 P.002/004 H15004145925

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PIL, LLC			
Name of the Lim	ted Lisbility Company as h now appears (A Florida Limited Liebility Company)	on our records.)	
The Articles of Organization for this Limited L Florida document number <u>L13000040273</u>	iability Company were filed on 03-	5-2013 a	nd assigned
This amendment is submitted to amend the fell	owing:	:	
A. If amending name, enter the new name of	f the limited limbility company her	<u>ra</u> ;	
The new name must be distinguishable and contain the	words "Limited Liability Company," the de	signation "LLC" or the abbreviat	ion "L.L.C."
Enter new principal offices address, if applic	eable:		
(Principal office address MUST BE A STREE	ADDRESS)		
Enter now mailing address, if applicable; (Mailing address MAY BE A POST OFFICE B. If amending the registered agent and registered agent and/or the new registered of Name of New Registered Agent: New Registered Office Address:	/or registered office address on ffice address here: CLAUDIA CZETYRKO CPA PA 9290 SW 72 STREET SUITE 103	Our records, enter mie in OF STATE OR	TOPE STAT
			<u>†</u>
	MIAMI	. Florida 33173	Code
New Registered Avent's Signature, if changing	Registered Agent:	! !	
I hereby accept the appointment as registers provisions of all statutes relative to the propaction as registers being filed to merely reflect a change in the company has been notified in writing of this	er and complete performance of t istered agent as provided for in Cr registered office address, I herebj	ny duties, and I am famili hapter 605, F.S. Or, if this	ar with and document is

Page 1 of 3

ered Agent, Signature of New Registered Agent

....

HP LASERJET FAX

or removed	g Authorized Person(s) authorized to from our records:		THE PERSON OF TH
MGR = N	lanager Authorized Member	•	
<u>Fitle</u>	Name	Address	Type of Action
	ATTIKET.	Auditens	Type of Action
 ~~			Add
		;	□ Remove
			Change
·····			
			□ Remove
			Change
			
			Remove
			Change
		÷ •	
			□ Remove
		:	□ Change
			Aug Aug
		:	JUNE CORPORA SIGN OF CORPORA BEOFT TAPY OF STA
			ASSEE CORP
			SEE FLOT SAdd
		:	DRemove
			Change

H15000145925

		: 	
			
•			
			
			
			···
			
antim data if ath	er than the date of filing:	(or	otional)
effective date is listed	er than the date of filing: d, the date must be specific and camen be prior to de ted in this block does not meet the applicable	te of filling or more than 90 days at	fter filling.) Pursuant to 605.0207
ument's effective d	late on the Department of State's records.	strangery come reduces	
		•	To TO VISE
record specifies he 90th day aft	s a delayed effective date, but not ar er the record is filed.	effective time, at 12:01	1 a.minon the earlier of
			五 岩
ed JUNE 12	. 2015		F CO
1 1	1		CORPORATIONS CORPORATIONS SAM 8: 19 BY OF SIAIE RY OF SIAIE RY ELORIDA
× Ley	Signature of a member or authorize	representative of a member	ORATIO
	_	• ;	
יון או ושתו	MEL-CIBUXIA Czetyrko		-

Page 3 of 3