

L13000151762

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

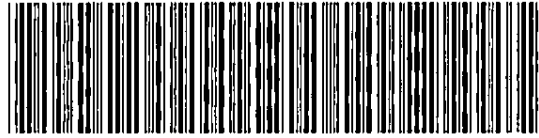
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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RECEIVED
DEPARTMENT OF STATE
18 OCT 15 AM 9:55

FILED
18 OCT 15 AM 9:22
CLERK OF COURT

G SIMMONS
OCT 15 2018

Incorporating Services, Ltd.

1540 Glenway Drive
Tallahassee, FL 32301
850.656.7956
Fax: 850.656.7953
www.Incserv.com
e-mail: info@incserv.com



ORDER FORM

TO Florida Department of State
Division of Corporations, Clifton
Building
2661 Executive Center Circle
Tallahassee, FL 32301
corphelp@dos.myflorida.com
850-245-6051

FROM Melissa Stops
mstops@incserv.com
850.656.7953

REQUEST DATE 10/12/2018

PRIORITY Routine

OUR REF # (Order ID#) 688425

ORDER ENTITY

PINE MARTIN INVESTMENT II LLC

PLEASE PERFORM THE FOLLOWING SERVICES:

PINE MARTIN INVESTMENT II LLC (FL)

File the attached amendment

NOTES:

\$25.00 Authorized

Email address for annual report reminders: ntouboul@allenmatkins.com

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: 120050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

A handwritten signature in black ink, appearing to be "M" or "W" with a stylized flourish.

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Pine Martin Investment II 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 October 28, 2013 and assigned
Florida document number L13000151762.

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 "L.L.C."

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 name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

City

Florida

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 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.

If Changing Registered Agent, Signature of New Registered Agent

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	Danielle Touboul	10225 Collins Avenue, Apt. 702	<input type="checkbox"/> Add
		Bal Harbour, Florida 33154	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Nathaniel Dimitri Touboul	10225 Collins Avenue, Apt. 702	<input type="checkbox"/> Add
		Bal Harbour, Florida 33154	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Nelson Touboul	10225 Collins Avenue, Apt. 702	<input type="checkbox"/> Add
		Bal Harbour, Florida 33154	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Talia May Touboul	10225 Collins Avenue, Apt. 702	<input type="checkbox"/> Add
		Bal Harbour, Florida 33154	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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1961

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61 15 PM 9 22

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated October 10 2018

Typed or printed name of signee