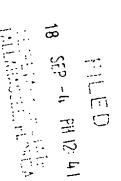
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(F	Requestor's Name)	
(/	Address)	
(<i>F</i>	Address)	
(0	City/State/Zip/Phone #)	····-
PICK-UP	☐ WAIT	MAIL
(E	Business Entity Name)	
(<u>[</u>	Document Number)	
Certified Copies	Certificates of	Status
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COVER LETTER

TO:

TO:		istration Sec ision of Corp			
S1 (D 1	ECT:	PPGN LLC	;		
SUBJ	EC1:		Name of Lim	ited Liability Company	
The er	nclosec	f Articles of .	Amendment and fee(s) are sub-	mitted for filing.	
Please	return	all correspo	ndence concerning this matter	to the following:	
			ANA M HERNANDEZ		
			XPRESS REALTY LLC	Name of Person	**
				Firm/Company	
			19370 SW 29 CT.		
			MIRAMAR, FL 33029	Address	
			anah@xpressrealty.net	City/State and Zip Code	
For fu	rther is	nformation co	E-mail address: () oncerning this matter, please ca	to be used for future annual report not	ification)
ANA	M HE	RNANDEZ		786 942-3139	
		Name of	i Person	Area Code Daytin	ne Telephone Number
Enclos	sed is a	a check for th	ne following amount:		
■ \$2	25.00 F	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)
		Registr Divisio	ING ADDRESS: ation Section n of Corporations ox 6327	STREET/COUR Registration Section Division of Corpo Clifton Building	on

Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PPGN LLC		
(Name of the Limited I (A I	iability Company as it now appears on our records.) lorida Limited Liability Company)	
The Articles of Organization for this Limited Liabi	lity Company were filed on 09/05/2014	and assigned
lorida document number L14000139109		
his amendment is submitted to amend the following	ng:	
. If amending name, enter the new name of th	e limited liability company here:	
		B
he 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	e:	
Principal office address MUST BE A STREET A	(DDRESS)	TO PER CO
		1.02 t
Enter new mailing address, if applicable:		<u> </u>
Mailing address MAY BE A POST OFFICE BO	X)	
3. If amending the registered agent and/or egistered agent and/or the new registered office	•	nter the name of the
Name of New Registered Agent:	·	
New Registered Office Address:		
	Enter Florida street address	
	, Florid	la
-	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 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>	Type of Action
AMBR	INVERSIONES GRUPO PPGN S.A.	Mossfon Bldg, 2 FL, E. 54th St. Panama-Rep of Panama	Add
		 	Remove
			Change
			☐ Remove
			Change
			Add
			Remove
			GChange
			Add D
			Change
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fective date, if other than the an effective date is listed, the date must	date of filing:	to date of tiling or more tha	o 90 days after filing y Pursuant to	. 605 N
ote: If the date inserted in this blo	ock does not meet the applica	able statutory filing requ	irements, this date will not be	listed
ocument's effective date on the De	partment of State's records.			
record specifies a delayed	effective date, but no	t an effective time,	at 12:01 a.m. on the ea	arlier
The 90th day after the reco				
	2018			
August 31				
August 31	· · · · · · · · · · · · · · · · · · ·			
August 31 [Curn] Ha	Signature of a member or author			

Page 3 of 3

Filing Fee: \$25.00