LIS 000015427

(Re	questor's Name)	
(Ad	dress)	
— (Ad	dress)	
(Cit	y/State/Zip/Phon	ne #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
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	Office Use Or	
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COVER LETTER

: :

Tallahassee, FL 32314

P.O. Box 6327

(111 0.1 1) (110.11)		ADING, LLC			
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fec(s) are sub	mitted for filing.			
Please return all correspo	indence concerning this matter	to the following:			
	JULI	O C MOLINA			
		Name of Person			
		J.C. MOLINA & ASSOC			
Firm/Company					
8260 W. FLAGLER STREET STE 2-C					
		Address			
		MIAMI, FL. 33144			
	11:11	City/State and Zip Code IO@JCMOLINAASSOC.COM			
		to be used for future annual report not	ification)		
For further information c	oncerning this matter, please ca	all:			
JULIO C N	IOLINA	786 797 8700	<i>etr</i>	·· .	Ej
Name o	f Person	Area Code Daytim	ne Tetephone Number		
Enclosed is a check for the	ne following amount:				
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified (e of S igi us &	J
<u>Mailing Addres</u> Registration ! Division of C	Section	<u>Street Address:</u> Registration Sc Division of Co			

The Centre of Tallahassee

2415 N. Monroe Street, Suite 810 Tallahaccoo FL 32363

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PPT TRADIN				
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)			
The Articles of Organization for this Limited Liability Company Florida document number $\frac{L15000015427}{L15000015427}$	were filed on 01/26/2015	and assigned		
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	ility company here:			
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the	ubbreviation "L.L.C."		
Enter new principal offices address, if applicable:	8260 W FLAGLER STREET STE 2-C			
(Principal office address MUST BE A STREET ADDRESS)	MIAMI, FLORIDA 33144			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	8260 W FLAGLER STREET STE 2-C MIAMI, FLORIDA 33144			
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, <u>enterathe nai</u> Ma	me of the new registered		
Name of New Registered Agent:		() () () () () () () () () ()		
New Registered Office Address:				
	Enter Florida street address , Florida	≥ J		
	Ciņ-	N 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 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>Address</u> **Title** Type of Action Name: Remove (D Change. **№** □Remove _____ ERemove

						
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	07/01/2021			A,		
ffective date, if other than the date of filing an effective date is listed, the date must be specific as	ng:	·**	(optional)		
ote: If the date inserted in this block does not	t meet the applicable statt	ning or more than 90 day nory filing requiremen	s aner min ts, this dat	g.) rursuam e will not	eto 605.) be liste	0207 (d as t
ocument's effective date on the Department of	"State's records,					
record specifies a delayed effective date, but no lis filed.	ot an effective time, at 12	:01 a.m. on the earlier	of: (b) - T	he 90th da	ıy after	the
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attu		-, '/ , 1				
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Signature of a	a member or authorized repr	esentative of a member				
	HH KAZISAMINI					
	JULIO C MOLINA					