May. 17. 2019 (No. 0648 Division of Corporations Separtment of State

Division of Corporations Electronic Filing Cover Sheet

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То:	Division of Corporations Fax Number : (850)617-6383	FILED
From:	Account Name : CIKLIN LUBITZ Account Number : 076376001447 Phone : (561)832-5900 Fax Number : (561)833-4209	0: 32 LORIDA

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

Email Address: acikLiN @ CikLinLubitz. Com

PANDION ADVISO	RS II, LLC
Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.0

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

 Pandion Advisors II, LLC
 (Name of the Limited Liability Company as it now appears on our records.) (A Plorida Limited Liability Company)

 The Articles of Organization for this Limited Liability Company were filed on 6/11/2015
 and assigned of four file for this Limited Liability Company were filed on 6/11/2015

 Florida document number
 L15000101872

 This amendment is submitted to amend the following:
 A. If amending name, enter the new name of the limited liability company here:

Pandion Resource Investors, LLC

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, <u>enter the name of the new</u> registered agent and/or the new registered office address here:

Name of New Registered Agent:		
New Registered Office Address:	Enter Florido street address	
		, Florida
	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

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No. 0640 P. 374

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person, being added</u> or removed from our records: H19000162297 3

MGR = Manager AMBR - Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
	<u>-</u>		bbA 🗠
			Remove
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) H19000162297 3 NH 10: .

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If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated May 20 2010 authorized representative of a member nine of ober o Alan J. Ciklin

Typed or printed name of signee

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Filing Fee: \$25.00