

L15000156349

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

☐

MAIL

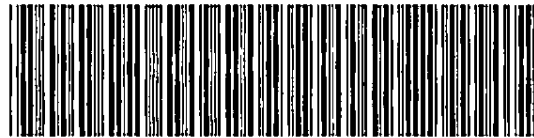
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA  
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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Pampellone LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.  
Please return all correspondence concerning this matter to the following:

BROUANT, JEAN-MARIE

Name of Person

Pampellone LLC

Firm/Company

33 4TH STREET N STE 201

Address

ST PETERSBURG, FL 33701

City/State and Zip Code

jm06000@hotmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Chant Karajian

Name of Person

814

at ( )

Area Code

707-3773

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &  
Certificate of Status

☐ \$25.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐ \$60.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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

Pampellone 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 09/14/2015 and assigned  
Florida document number L15000156349

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:

5315 Park Blvd, Suite 3

**(Principal office address MUST BE A STREET ADDRESS)**

Pinellas Park, FL 33781

Enter new mailing address, if applicable:

5315 Park Blvd, Suite 3

**(Mailing address MAY BE A POST OFFICE BOX)**

Pinellas Park, FL 33781

**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:

5 Stars Plus Real Estate Services LLC

New Registered Office Address:

5315 Park Blvd, Suite 3

Enter Florida street address

Pinellas Park,

City

Florida 33781

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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TALLAHASSEE, FLORIDA  
18 FEB 12 PM 7:05

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         | GARNIER, OLIVIER, Sr. | 33 4TH STREET N SUITE 201 | <input type="checkbox"/> Add               |
|              |                       | ST PETERSBURG, FL 33701   | <input checked="" type="checkbox"/> Remove |
|              |                       |                           | <input type="checkbox"/> Change            |
|              |                       |                           | <input type="checkbox"/> Add               |
|              |                       |                           | <input type="checkbox"/> Remove            |
|              |                       |                           | <input type="checkbox"/> Change            |
|              |                       |                           | <input type="checkbox"/> Add               |
|              |                       |                           | <input type="checkbox"/> Remove            |
|              |                       |                           | <input type="checkbox"/> Change            |
|              |                       |                           | <input type="checkbox"/> Add               |
|              |                       |                           | <input type="checkbox"/> Remove            |
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|              |                       |                           | <input type="checkbox"/> Add               |
|              |                       |                           | <input type="checkbox"/> Remove            |
|              |                       |                           | <input type="checkbox"/> Change            |

18 FEB 12 PM 7:14

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. A vertical line runs down the center of the page, creating two equal-width columns. The lines are evenly spaced and extend across the entire width of the page. There is no handwriting or other markings on the paper.

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) 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 February 6th 2018

~~BROUANT, JEAN-MARIE~~

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**Filing Fee: \$25.00**