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(Re	equestor's Name)	
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PICK-UP	WAIT	MAIL
(Bı	usiness Entity Nam	ne)
/D	ocument Number)	
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE

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COVER LETTER

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TO: Registration Se Division of Cor				
248 Silverb	ack Investment LLC			
SUBJECT:	Name of Lim	ited Liability Company	₽ ,	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Javier Jimenez			
		Name of Person		
	248 Silverback Investment	LLC		
		Firm/Company		
	1901 Ponce De Leon Blvd			
		Address		
	Coral Gables, FL 33134			
		City/State and Zip Code		
	jjimenez@pagroupco.com		<u>s.</u>	
	E-mail address: (to be used for future annual report notification)		
For further information c	oncerning this matter, please ca	all:	₹ 2	
Javier Jimenez, Jr.		305 370-3882	2016 J SECSI L 8102	-11
Name o	f Person	Area Code Daytime Telephone	26 SSEE	
Enclosed is a check for the	he following amount:		P 12: 0F \$17 0.F1.01	
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	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

248 SILVERBACK INVETMENT L	LC	
(<u>Name of the Limited</u> (A	Liability Company as it now appears on our records.) Florida Limited Liability Company)	
The Articles of Organization for this Limited Liab	bility Company were filed on 12/1/2015	and assigned
This amendment is submitted to amend the follow	ving:	
A. If amending name, enter the new name of t	he limited liability company here:	
248 SILVERBACK INVESTMENTS LLC		
he new name must be distinguishable and contain the wor	rds "Limited Liability Company," the designation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applicat	ble:	· · · · · · · · · · · · · · · · · · ·
Principal office address MUST BE A STREET	ADDRESS)	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE B	OX)	
	1.1.1 1000	
3. If amending the registered agent and/or	r registered office address on our records, enter	the name of the ne
egistered agent and/or the new registered offi	ce address here:	201
Name of New Registered Agent:		JAN 2 RETA AHAS
		SE 7
New Registered Office Address:	E El .:1	
	Enter Florida street address	158 25 158 159
		22
	City	Zip Gode) ~

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> Address **Type of Action** □ Add _□ Remove ☐ Change □ Add _□ Remove ☐ Change ☐ Add □ Remove TALL HASSEF FLORIDA Add ☐ Change ☐ Remove □ Change _□ Add _□ Remove _□ Change

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	JANUARY 20, 2016	م کر	
Effective (If an effective of the effect	ye date, if other than the date of filing: (optional) ctive 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 605.0)207
Note: I	f the date inserted in this block does not meet the applicable statutory filing requirements, this date vent's effective date on the Department of State's records.	will not be listed	l as
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. of 90th day after the record is filed.	on the earlier	⁻ 01
Dated _			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00