

216000094807

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

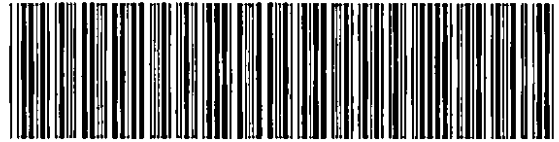
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
18 AUG 27 PM 2:43

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AUG 29 2018

COVER LETTER

REGISTRATION SECTION
DIVISION OF CORPORATIONS

PALMARE PRIVATE BROKERAGE LLC

SUBJECT: _____
Name of Limited Liability Company

Articles of Amendment and fee(s) are submitted for filing.

For additional correspondence concerning this matter to the following.

JONATHAN HEW

Name of Person
PALMARE PRIVATE BROKERAGE

Firm Company
212 PONCE DELEON BLVD, 1780

Address
CORAL GABLES, FL 33134

City State and Zip Code
JONATHAN@PALMAREPRIV.COM

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

For more information concerning this matter, please call:

JONATHAN HEW (305) 447-7401

Name of Person Area Code Daytime Telephone Number

The enclosed fee is for the following amount:

- \$25.00 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 copies, not sold)

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

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

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

M. MARE PRIVATE BROKERAGE 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 5/13/16 and assigned Florida document number 11600004807.

This amendment is submitted to amend the following:

1. If amending name, enter the new name of the limited liability company here:

Names must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

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)

3. 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:

New Registered Office Address:

Enter Florida street address

City, Florida 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 all provisions of the statutes relative to the proper and complete performance of my duties, and I am familiar with and understand the duties and conditions of my position as registered agent as provided for in Chapter 605, F.S., or, if this document merely reflects 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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If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
	ANACCOLONGETTE	2121 PONCE DE LEON BLVD	<input checked="" type="checkbox"/> Add
		SUITE 1280	<input type="checkbox"/> Remove
		CORAL GABLES, FL 33134	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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3. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Multiple horizontal lines for amending information.

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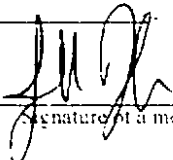
4. Effective date, if other than the date of filing: _____ (optional)

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 (c)(3)(D) of

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.

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

Dated August 23, 2018



Signature of a member or authorized representative of a member

NATHAN HEW

Typed or printed name of signee