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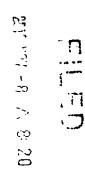
(Address)  (Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer:			
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## **COVER LETTER**

то:	Registration So Division of Cor				
SUBJE	PIERANG.	LEA, LLC			
SUBJE	CI:	Name of Lim	ited Liability Company	<del>,</del>	
The enc	losed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please re	eturn all correspo	ondence concerning this matter	to the following:		
		JONATHAN BUNTE			
		CPA SOLUTIONS, INC	Name of Person		
		<del></del>	Firm/Company		
		605 EAST ROBINSON ST	Γ #450	ţ.	ä . 🔻
			Address		
		ORLANDO, FL 32801			ب
		JONATHAN@MYCPASO	City/State and Zip Code		න් දු
		E-mail address: (	to be used for future annual report notifi	cation)	; 50 52
For furth	ner information o	concerning this matter, please co	all:		
	Name (	of Person	at () Area Code Daytime	Telephone Number	
Enclosed	d is a check for t	he following amount:			
\$25.	.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified (	of Status &
	Regist	ING ADDRESS: ration Section on of Corporations	STREET/COURIE Registration Section Division of Corpora	1	

P.O. Box 6327 Tallahassee, FŁ 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PIERANGELA, LLC				
( <u>Name of the Limited Liabi</u> (A Flori	lity Company as it now appears on our reco da Limited Liability Company)	ords.)		
The Articles of Organization for this Limited Liability	Company were filed on 07/06/2016	<u> </u>	and ass	signed
lorida document number L16000127697	<u></u> .			
his amendment is submitted to amend the following:				
. If amending name, enter the new name of the lin	nited liability company here:			
he new name must be distinguishable and contain the words "Li	mited Liability Company," the designation "L	LC" or the abb	reviation "L.	L.C."
nter new principal offices address, if applicable:				
Principal office address MUST BE A STREET ADD	ORESS)	``	~3	
				- 1 J
			.3	
nter new mailing address, if applicable:		<del></del> -	ည	11
Aailing address MAY BE A POST OF FICE BOX)			<u>ラ</u>	
		1		
. If amending the registered agent and/or reg		rds, <u>enter t</u>	he name	of the
Name of New Registered Agent:				
New Registered Office Address:		<del> </del>		
	Enter Florida str <b>e</b> et ada	ress		
		Florida	77 (2.1	
	Ciry		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

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>	Type of Action
MGR	RITHA PIERANGELLA SIERRA PONCE	1674 LAKEMONT AVE #302 ORLANDO, FL 32814	<b>⊠</b> Add
		<del></del>	□ Remove
			Change
			Add
			Remove
			Change
			☐ Remove ☐
			Add
			Change
<u>.</u>			□ Add
			Remove
		<del></del>	☐ Change
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			□ Change

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Effective date, if other than the date of filing:  (If an effective date is listed, the date must be specific and cannot be prior to Note: If the date inserted in this block does not meet the applicate document's effective date on the Department of State's records.	(optional) to date of filing or more than 90 days after filing.) Pursuant to 605. able statutory filing requirements, this date will not be lister
the record specifies a delayed effective date, but not ) The 90th day after the record is filed.	an effective time, at 12:01 a.m. on the earlie
Dated OCTOBER 31, 2018	<del></del> ·
C 4.	
Cimputer of a mamber or author	rized representative of a member

Page 3 of 3

Filing Fee: \$25.00