1/600/28826

(Re	equestor's Name)			
(Ad	dress)			
(Ad	ldress)			
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL.		
(Bu	ısiness Entity Nar	ne)		
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				
	•			





200311317492

04/02/18--01040--003 **25.00



Y SULKER APR 0 8 2018

COVER LETTER

Division of Co			•
SUBJECT:	Petecof H	oldings, LLC	
	Name of Lim	ited Liability Fompany	
The enclosed Articles of	of Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	oondence concerning this matter	to the following:	
	F	brizio Peter	of
	Peteco	Name of Person Holding, Firm Company	LLC
		NW 77+4 CT	_
	H	ismi FL 331k	66
	Fabrizio E-mail address: (City/State and Zip Code Con france logi to be used for future annual report not	stics, com.
For further information	concerning this matter, please c	all:	
Fabri 7	o Petecot	at (786) 582	- 4341
Name	of Person	Area Code Daytim	e Telephone Number
Enclosed is a check 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 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

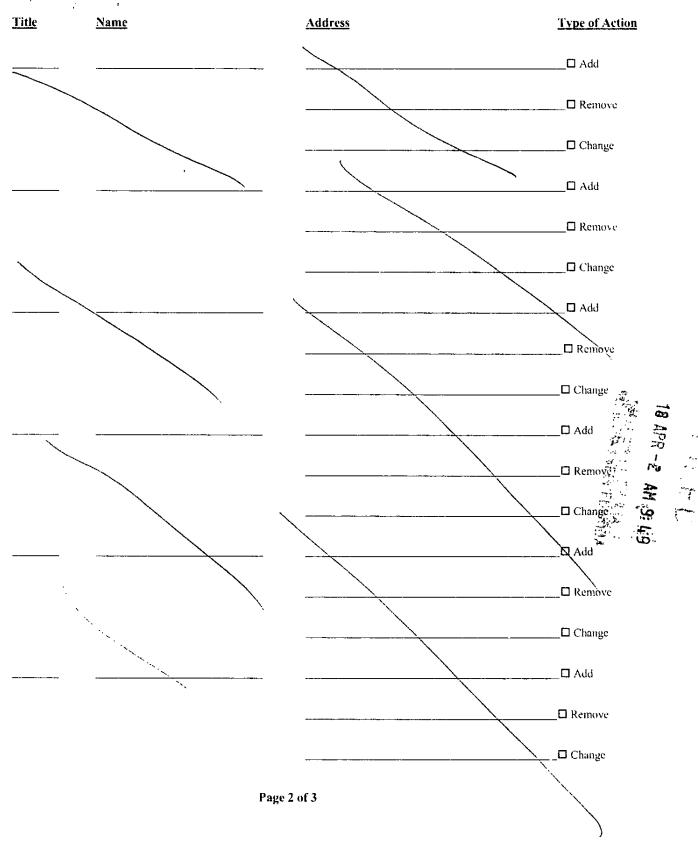
Petecot Holdi	ings, LLC	
	ny as a now appears on our records.)	
The Articles of Organization for this Limited Liability Company v Florida document number <u>L 16 000 12 8826</u>	were filed on $07/14/2016$ and assi	igned
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited liabil</u>	tments. LLC	
The new name must be distinguishable and contain the words "Limited Liability		C."
Enter new principal offices address, if applicable:	6700 NW 7744C1 #14	<i>‡</i> 0
(Principal office address MUST BE A STREET ADDRESS)	Himu FL 33/66	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Some os Above	
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here		of the acw
Name of New Registered Agent:		
New Registered Office Address:		30 To
	Enter Florida street address , Florida City Zip Code	9
New Registered Agent's Signature, if changing Registered Agent:	Cay Zap Code	
I hereby accept the appointment as registered agent and agree	e to act in this capacity. I further agree to comp	tv 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



` \		
_		
_		
-		
_		
_		
_		
-		
-		
-		T ₂ -
_		
_		AP AP
		No.
-		
Effecti	ive date, if other than the date of filing: $\frac{02}{15}/2018$ (optional)	. 19
[If an eff	ective 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 602 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list	80207-(3)(I
	ent's effective date on the Department of State's records.	ou us mo
. i.		
	ford specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlings of the feeting of the feetin	er of:
Dated	February 15 2018	
	Signature of a member or authorized representative of a member	

Page 3 of 3

Filing Fee: \$25.00