2/1/2018



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name ; TAX PLACE Account Number : I20100000011 Phone : (954)369-4444 Fax Number : (954)369-4446

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on 07/29/2016	and assigned
Florida document number L16000142725		
This amendment is submitted to amend the following:		
A. If amending name, enter the new game of the limited liab	ility corapany here:	50
PI WEALTH MANAGEMENT LLC		j j
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the a	bbreviation "LUC."
Enter new principal offices address, if applicable:	1664 WEST HILLSBORO BLVD	# :
Principal office address MUST BE A STREET ADDRESS)	DEERFIELD BEACH, FL 33442	5
		1.
Enter new mailing address, if applicable:	1664 WEST HILLSBORO BLVD	
Mailing address MAY BE A POST OFFICE BOX)	DEERFIELD BEACH, FL 33442	
•		
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her Name of New Registered Agent:	ffice address on our records, <u>enter</u>	r the name of the
wante of the Registered Figure		
New Registered Office Address:	Enter Florida street address	

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 addres. 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

Title	<u>Name</u>	Address	Type of Action
MGR	JOAO E SOARES CUNHA	1664 WEST HILLSBORO BLVD	
		DEERFIELD BEACH, FL 33442	☐ Remove
		33	
MGR	DIEGO S DE ASSIS	1664 WEST HILLSBORO BLVD	
		DEERFIELD BEACH, FL 33442	Remove
			🗆 Change
MGR	ADRIANA D ROSA	3210 EMERALD POINTE DR 201	
		HOLLYWOOD, FL 33021	
			Change
			□ Remove
			Change
	·		🗀 Add
			Renjove
			Change
			Add
		<u>.</u> .	
			Remove
			Change

tive date, if other than the date of filing: \(\begin{align*} \begin{align*} \begin{align*} \leq \begin{align*} \leq \leq \leq \end{align*} \] The 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 60. If the date inserted in this block does not meet the applicable structory filing requirements, this date will not be list text of a frecious date on the Department of State's records. Cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier applicable of a member or authorized representative of a member of the source of a member o			
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