

L170000036690

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

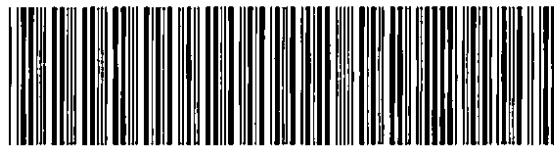
(Business Entity Name)

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LLC Amend

12/14/23--01006--001 \*\*25.00

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2023 NOV 29 AM 8:17  
CLERK OF COURT

A. M.

DEC -14 2023



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 2, 2023

PATRICK NORAME  
PJIMEX INTERNATIONAL LLC  
12355 HAGEN RANCH RD #607  
BOYNTON BEACH, FL 33437 US

SUBJECT: PJIMEX INTERNATIONAL LLC  
Ref. Number: L17000036690

We have received your document for PJIMEX INTERNATIONAL LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Annette Ramsey  
OPS

Letter Number: 923A00015279

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: PTIMEX INTERNATIONAL LLC  
Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

PATRICK NORAME  
Name of Person

PTIMEX INTERNATIONAL LLC  
Firm/Company

9467 LAKE SERENA DRIVE  
Address

BOCA RATON, FL 33496  
City/State and Zip Code

ADMIN@SA/ITALIANRISTORANTE.BIZ  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

PATRICK NORAME at (561) 777-6264  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
|--|--|--|--|

Mailing Address:  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Street Address:  
Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

FILED

2023 NOV 29 AM 8:17

PSIMEX INTERNATIONAL, LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

CLERK OF STATE  
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 02/15/2017 and assigned  
Florida document number L17000036690.

This amendment is submitted to amend the following:

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

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

12355 Hagen Ranch Rd, 607  
Boynton Beach, FL 33437

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

12355 Hagen Ranch Rd, 607  
Boynton Beach, FL 33437

B. 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:

MURIELLE DIANE DOR

New Registered Office Address:

12355 Hagen Ranch Rd, Suite 607  
Enter Florida street address

Boynton Beach, Florida 33437  
City 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.*

*[Signature]*

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>	<u>Type of Action</u>
<u>S</u>	<u>MURIELLE DORVILLE</u>	_____	<input type="checkbox"/> Add
		_____	<input checked="" type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
<u>MGR</u>	<u>MURIELLE DIANE DOR</u>	_____	<input checked="" type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
<u>P</u>	<u>PATRICK NORAME</u>	_____	<input type="checkbox"/> Add
		_____	<input checked="" type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
<u>MGR</u>	<u>PATRICK NORAME</u>	_____	<input checked="" type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
<u>VP</u>	<u>MARJORIE NORAME</u>	_____	<input type="checkbox"/> Add
		_____	<input checked="" type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
<u>MGR</u>	<u>MARJORIE NORAME</u>	_____	<input checked="" type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change

1. *Introduction*  
 2. *Background*  
 3. *Methodology*  
 4. *Results*  
 5. *Discussion*  
 6. *Conclusion*  
 7. *References*  
 8. *Appendix*  
 9. *Index*  
 10. *Glossary*  
 11. *Notes*  
 12. *Footnotes*  
 13. *Endnotes*  
 14. *Tables*  
 15. *Figures*  
 16. *Equations*  
 17. *Formulas*  
 18. *Diagrams*  
 19. *Charts*  
 20. *Graphs*  
 21. *Tables*  
 22. *Figures*  
 23. *Equations*  
 24. *Formulas*  
 25. *Diagrams*  
 26. *Charts*  
 27. *Graphs*  
 28. *Tables*  
 29. *Figures*  
 30. *Equations*  
 31. *Formulas*  
 32. *Diagrams*  
 33. *Charts*  
 34. *Graphs*  
 35. *Tables*  
 36. *Figures*  
 37. *Equations*  
 38. *Formulas*  
 39. *Diagrams*  
 40. *Charts*  
 41. *Graphs*  
 42. *Tables*  
 43. *Figures*  
 44. *Equations*  
 45. *Formulas*  
 46. *Diagrams*  
 47. *Charts*  
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 52. *Formulas*  
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 65. *Equations*  
 66. *Formulas*  
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 71. *Figures*  
 72. *Equations*  
 73. *Formulas*  
 74. *Diagrams*  
 75. *Charts*  
 76. *Graphs*  
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 79. *Equations*  
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 81. *Diagrams*  
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 85. *Figures*  
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 108. *Formulas*  
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 112. *Tables*  
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 125. *Graphs*  
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 127. *Figures*  
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 139. *Graphs*  
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 142. *Equations*  
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 144. *Diagrams*  
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 154. *Tables*  
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 160. *Graphs*  
 161. *Tables*  
 162. *Figures*  
 163. *Equations*  
 164. *Formulas*  
 165. *Diagrams*  
 166. *Charts*  
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 168. *Tables*  
 169. *Figures*  
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 171. *Formulas*  
 172. *Diagrams*  
 173. *Charts*  
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 192. *Formulas*  
 193. *Diagrams*  
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 195. *Graphs*  
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 200. *Diagrams*  
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 202. *Graphs*  
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 208. *Charts*  
 209. *Graphs*  
 210. *Tables*  
 211. *Figures*  
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 213. *Formulas*  
 214. *Diagrams*  
 215. *Charts*  
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 217. *Tables*  
 218. *Figures*  
 219. *Equations*  
 220. *Formulas*  
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 222. *Charts*  
 223. *Graphs*  
 224. *Tables*  
 225. *Figures*  
 226. *Equations*  
 227. *Formulas*  
 228. *Diagrams*  
 229. *Charts*  
 230. *Graphs*  
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 232. *Figures*  
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 235. *Diagrams*  
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 237. *Graphs*  
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 246. *Figures*  
 247. *Equations*  
 248. *Formulas*  
 249. *Diagrams*  
 250. *Charts*  
 251. *Graphs*  
 252. *Tables*

(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 605.0207 (3)(b)

**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: (b) The 90th day after the record is filed.

Dated 11/29/2023

Signature of a member or authorized representative of a member

PATRICK NORAME

Typed or printed name of signee

**Filing Fee: \$25.00**