117000106192

| (Requestor's Name) |
|-----------------------------------------|
| (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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Office Use Only



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COVER LETTER

| TO: | Registration Se Division of Cor | | | |
|--------------|------------------------------------|-------------------------------------------------|---------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|
| CTID 1 | 831 THL, I | LLC | | |
| SUB | JEC1. | Name of Lim | ited Liability Company | |
| The e | nclosed Articles of | Amendment and fee(s) are sub | mitted for filing. | |
| Please | e return all correspo | ndence concerning this matter | to the following: | |
| | | FRANZ MELO | | |
| | | | Name of Person | |
| | | PEGASO HOLDINGS, LI | .c | |
| | | | Firm/Company | |
| | | 2490 Coral Way, Stc. 200 | | |
| | | | Address | |
| | | Miami, FL 33126 | | |
| | | | City/State and Zip Code | , |
| | | E-mail address: (| to be used for future annual report noti | fication) |
| For fu | urther information c | oncerning this matter, please c | all: | |
| FRA | NZ MELO | | at (| |
| | Name o | f Person | at () Area Code Dayting | ne Telephone Number |
| Enclo | sed is a check for the | ne following amount: | | |
| □ \$2 | 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

831 THL, LLC

| (Name of the Limi | ed Liability Compa (A Florida Limited) | ny as it now appears on our records.) Liability Company) | |
|---------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|----------------------------------------------------------|---------------------------------------------------|
| The Articles of Organization for this Limited L Florida document number L17000106192 | iability Company | were filed on May 12, 2017 | and assigned |
| This amendment is submitted to amend the foll | owing: | | min |
| A. If amending name, enter the new name o | f the limited liab | ility company here: | JUN -2 |
| The new name must be distinguishable and contain the v | vords "Limited Liabi | lity Company," the designation "LLC" or | · _ |
| Enter new principal offices address, if applic | able: | 2490 Coral Way, Ste. 200 | |
| (Principal office address MUST BE A STREE | T ADDRESS) | Miami, FL 33126 | ين <u>. </u> |
| | | | <u>-</u> |
| Enter new mailing address, if applicable: | | 2490 Coral Way, Ste. 200 | |
| (Mailing address MAY BE A POST OFFICE | BOX) | Miami, FL 33126 | |
| B. If amending the registered agent and registered agent and/or the new registered of Name of New Registered Agent: | or registered of office address her | e: | enter the name of the new |
| New Registered Office Address: | 2490 Coral Wa | y, Ste. 200 | |
| Toward of the Taurious. | | Enter Florida street address | |
| | Miami | , Flori | da 33126 Zip Code |
| Now Dordstand Agent's Signature of the water | D1-4 | | Zip Code |
| New Registered Agent's Signature, if changing I hereby accept the appointment as registere provisions of all statutes relative to the prop | ed agent and agr | ee to act in this capacity. I furth | |
| accept the obligations of my position as regi- being filed to merely reflect a change in the | istered agent as j | provided for in Chapter 605, F.S. | S. Or, if this document is |

Page 1 of 3

If Changing Registered Agent, Signature of New Registered Agent

company has been notified in writing of this change.

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> | Address | Type of Action |
|--------------|--------------------------|---------------------------|----------------|
| PMGR | The Housing League, Inc. | 2046 Treasure Coast Plaza | |
| | | Suite A370 | ■ Remove |
| | | Vero Beach, FL 32960 | Change |
| MGR | Pegaso Holdings, LLC | 2490 Coral Way, Stc. 200 | → Add |
| | | Miami, FL 33126 | Remove |
| | | | Change |
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