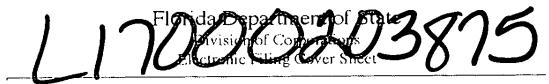
Date: 11/01/18 Time: 12:34 PM Page: 01/04 To: 18506176383 From: 12143052508

11/1/2018

Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:			•	
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To: 18506176383 From: 12143052508 Date: 11/01/18 Time: 12:34 PM Page: 02/04

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PELLEGRINA MANAGEMENT, LLC		. •	(*)
(Name of the Limited Liability Co	mpany as It now appears on our records ited Liability Company)	<u> </u>	
(A Florida Lim	ited Liability Company)	* •	<b>7</b> 2
	•	_	<b>3</b>
he Articles of Organization for this Limited Liability Comp	pany were filed on October 3, 2017		and assigned
			_ <u>-</u>
Florida document number L17000203875		•	₹11 <u>.</u>
This amendment is submitted to amend the following:			<del>_</del> .
this amendment is submitted to amend the following.		, ,	بې
. To the limited	Walder assument bound	>-	ယ္အ
A. If amending name, enter the new name of the limited	nability company nere:		ယ
	·		
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC	or the abb	reviation "L.L.C."
•	4100 Salzedo St., Apt. 813, Co	ral Gables	FL 33146
Enter new principal offices address, if applicable:	4100 Saizedo St., Apt. 615, Co	Tai Caulcs,	16. 33140
- · · · · · · · · · · · · · · · · · · ·	an a		
<u> Principal office address MUST BE A STREET ADDRES.</u>	<u></u>		<del></del>
•	•		
	4100 Salzedo St., Apt. 813, Co	ral Gables	, Fl. 33146
Enter new mailing address, if applicable:			
MARKET AND MAY BE A BOST OFFICE ROY			
(Mailing address MAY BE A POST OFFICE BOX)			
•	<del></del>		
B. If amending the registered agent and/or registere	ed office address on our record	s, <u>enter t</u>	the name of the
		s, enter 1	the name of the
		s, <u>enter (</u>	the name of the
		s, <u>enter 1</u>	the name of the
registered agent and/or the new registered office address		s, <u>enter (</u>	the name of the
		s, enter (	the name of the
Name of New Registered Agent:		s, enter 1	the name of the
registered agent and/or the new registered office address	s here:		the name of the
registered agent and/or the new registered office address  Name of New Registered Agent:			the name of the
registered agent and/or the new registered office address  Name of New Registered Agent:	s here:		the name of the
registered agent and/or the new registered office address  Name of New Registered Agent:	s here:  Enter Florida street addres		the name of the

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

To: 18506176383 From: 12143052508 Date: 11/01/18 Time: 12:34 PM Page: 03/04

(((H18000316171 3)))
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
MGR	STEFANO O. PAOLILLO	8550 NW 53rd St., No. B-104 Miami, FL. 33166	
			Aug
		<u> </u>	□ Remove
			Change
	JAVIER E. FRANCESCHI	4100 Salzedo St., Apt. 908	Change
MGR		Coral Gables, FL. 33146	🗆 Add
			Remove
•			Change
MGR	JAVIER E. GARRIDO LINGO	4100 Salzedo St., Apt. 908 Coral Gables, FL. 33146	
			<del></del>
		<del></del>	Remove
			☐ Change
			Change
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an effective date is listed ote: If the date insert	er than the date of fi I, the date must be specified ted in this block does not ate on the Department	and cannot be prid of meet the appli	or to date of filing ( leable statutory f	or more than 90 da	(optional) is after filing. its, this date	Pursuant will not l	to 605,0207 (3)() be listed as the
record specifies The 90th day aft	a delayed effectiver the record is file	e date, but n ed.	ot an effectiv	e time, at 12	:01 a.m. (	on the	earlier of:
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