## L17000227479

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## **COVER LETTER**

TO: Registration Se Division of Cor				
14902 PAE SUBJECT:	DOCK DRIVE, LLC	·		
SUBJECT:	Name of Lin	nited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	JORGE ORREGO			
	<del></del>	Name of Person	<del></del>	
		Firm/Company		
	3440 HOLLYWOOD BLV	VD., STE. 415	9	2623 Hily
		Address		UY 29
	HOLLYWOOD, FL 3302			
	JORGEORREGOLO@GM	City/State and Zip Code		で で で う
	<del>-</del>	to be used for future annual report no		5
For further information c	oncerning this matter, please e	all:		
JORGE ORREGO		305 907-5459		
Name o	f Person		me Telephone Number	
Enclosed is a check for the	he 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		Street Address: Registration S	ection	
Division of C	Corporations	Division of Co		
P.O. Box 632 Tallahassee, 1		The Centre of	Tallahassee oe Street, Suite 810	
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Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

14902 PADDOCK DRIVE, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on  $\frac{11/02/2017}{11/02/2017}$ \_\_\_\_\_ and assigned Florida document number L17000227479 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: PADDOCK INVESTMENT GROUP, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "L.I.C" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: N/A (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: N/A (Mailing address MAY BE A POST OFFICE BOX) 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: N/A Name of New Registered Agent: New Registered Office Address: Enter Florida street address , Florida

## 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

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MCR =	Manager
IVICIIC	Manager
AMRR =	Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			DAdd
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