1800037151

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(Address)			
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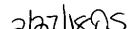
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COVER LETTER

TO:

	gistration Sec ision of Corp					
	Mi	guel A. Rodriguez Real Estate,	LLC '			
SUBJECT:	CT:Name of Limited Liability Company					
The enclosed	d Articles of a	Amendment and fee(s) are subt	nitted for filing.			
Please return	all correspon	ndence concerning this matter t	o the following:			
		Miguel A. Rodriguez				
			Name of Person	·		
		Pavon Realty Group, LLC				
Firm/Company						
		1800 Forest Hill Blvd., Sui	te A-5			
			Address		7.S 28	
		West Palm Beach, FL 3340	06	ר י		77
		miguel@pavonrealtygroup.c	City/State and Zip Code	·	2018 FEB 26 SECALTARY	FILED
		E-mail address: ()	o be used for future annual report notifica	ntion)	TA TO	E
For further i	nformation c	oncerning this matter, please ca	ill:		2: 3	
Miguel A. F	Rodriguez		561 603-9473		30	
	Name o	f Person		elephone Number		
Enclosed is	a check for th	ne following amount:				
\$25.00 F	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	of Status &	
	Registr Divisio P.O. Be	ING ADDRESS: ation Section on of Corporations ox 6327 assee, FL 32314	STREET/COURIER Registration Section Division of Corporati Clifton Building 2661 Executive Cent	ions er Circle		

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability	Company as it now appears on our records.)
	Limited Liability Company)
The Articles of Organization for this Limited Liability Co	ompany were filed on O2/09/2018 and assigned
Florida document number <u>∠/800037151</u>	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limit	ed liability company here:
The new name must be distinguishable and contain the words "Limit	ed 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 ADDRE	ESS)
D. d	25 Zb
Enter new mailing address, if applicable:	T P
(Mailing address MAY BE A POST OFFICE BOX)	FILE 22
	38
B. If amending the registered agent and/or registe	ered office address on our records, enter the name of the new
registered agent and/or the new registered office addr	ess here:
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
	,
New Registered Agent's Signature, if changing Registered	
provisions of all statutes relative to the proper and co accept the obligations of my position as registered ag	and agree to act in this capacity. I further agree to comply with the omplete performance of my duties, and I am familiar with and ent as provided for in Chapter 605, F.S. Or, if this document is I office address, I hereby confirm that the limited liability
	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 = MS $AMBR = AS$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
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			10.0	
Note:	Rective date, if other than the date of filing: O2/44/2018 Rective date is listed, the date must be specific and cannot be prior to date of filing or more than 90. If the date inserted in this block does not meet the applicable statutory filing requirement's effective date on the Department of State's records.	(optional days after ents, this	filing.) Pursuant to	605.0207 (3 listed as th
the re	cord specifies a delayed effective date, but not an effective time, at it goes to be goth day after the record is filed.	12:01 a	a.m. on the ea	arlier of:
Dated	February 14 2018			
	Signature of a member or authorized representative of a member	er		-
	Miquel A. Rodriguez Typed or printed name of signee			_

Page 3 of 3

Filing Fee: \$25.00