

3/8/2018

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Division of Corporations

No. 2496

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Florida Department of State

Division of Corporations

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From:

Account Name : US TAX CONSULTING INC.

Account Number : 120160000000

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DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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3/9/18 DS

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF  
PIRP LLC**

The Articles of Organization for this Florida Limited Liability Company were filed on 02/16/2018 and assigned Florida document number .

Florida document number: L18000042023.

EIN Number: 36-4890914

**Article I**

**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."

**Article II**

Enter new principal offices address, if applicable:

(Principal office address **MUST BE A STREET ADDRESS**)

950 CELEBRATION BLVD STE B, CELEBRATION FL 34747

Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

950 CELEBRATION BLVD STE B, CELEBRATION FL 34747

**Article IV**


**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: RODRIGO TAVARES

New Registered Office Address: 950 CELEBRATION BLVD STE B, CELEBRATION FL 34747

**New Registered Agent's Signature, if changing Registered Agent:**

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

  
\_\_\_\_\_  
Signature of New Registered Agent, if changing

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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

Title	Name	Address	Type of Action
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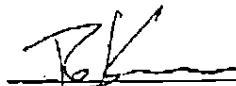
D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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E. Effective date, if other than the date of filing: (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

DATED: March 7, 2018



Signature of a member or authorized representative of a member

RODRIGO TAVARES

Typed or printed name of signee

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TALLAHASSEE FLORIDA

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