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M. MILLIGAN MAR 2 0 2018

## **COVER LETTER**

TO: Registration Se Division of Cor			
PARAISO SUBJECT.	PS LLC		
SUBJECT:	Name of Lim	ited Liability Company	<del></del>
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspondence	ondence concerning this matter	to the following:	
	ARTURO PERRET-GEN	TIL	
		Name of Person	
	PARAISO PS LLC		
		Firm/Company	<del></del>
	7700 VENTURA LANE		
		Address	
	PARKLAND, FL 33067		
		City/State and Zip Code	<del></del>
	RJTAXES@YAHOO.COM		
	E-mail address: (	to be used for future annual report notifi	ication)
For further information c	oncerning this matter, please co	all:	
BECKY WHEATON		561 732-8012	
Name o	f Person	Area Code Daytime	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 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

FILED

PARAISO PS LLC

2010 HAR 19 PM 3: 5:

(Name of the Limited Liabilit (A Florida	ty Company as it now appears Limited Liability Company)	on our recognition TALLAHA	ARY OF STATE ASSEE, FLORIDA
The Articles of Organization for this Limited Liability C	ompany were filed on $\frac{02/2}{2}$	21/2018	and assigned
Florida document number L18000046203		i	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limi	ted liability company her	<u>e</u> :	
The new name must be distinguishable and contain the words "Limi	ited Liability Company," the des	signation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:		<u>.</u>	
(Principal office address MUST BE A STREET ADDR	ESS)		
		<del></del>	,
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered agent and/or the new registered office add		our records, <u>ent</u>	er the name of the nev
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florid	la street address	-
	Cit	, Florida	7:01
New Registered Agent's Signature, if changing Registered	City		гір Соае
I hereby accept the appointment as registered agent of provisions of all statutes relative to the proper and confidence the obligations of my position as registered agong filed to merely reflect a change in the registered company has been notified in writing of this change.	and agree to act in this co omplete performance of n gent as provided for in Cl	ny duties, and I a napter 605, F.S. (	m familiar with and Or, if this document is

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	ARTURO PERRET-GENTIL TRUST	7700 VENTURA LANE	XXX Add
		PARKLAND, FL 33067	Remove
			Change
_MGR	ARTURO PERRET-GENTIL	7700 VENTURA LANE	□ Adđ
		PARKLAND, FL 33067	XX Remove
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