L18000054401

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(Address)				
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(Business Entity Name)				
(Decument Number)				
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TO:	Registration Se Division of Cor							
C 6 1 15 17	PSR DEVE	LOPMENT SOLUTIONS LLC	•					
SUBJE	CT:	Name of Limited Liability Company						
		Amendment and fee(s) are sub indence concerning this matter						
		SUZETTE ALONSO						
		<u> </u>	Name of Person					
		SMA MANAGEMENT SI	RVICES, INC.					
		/*,1/A8****	Firm/Company					
		5910 SW 73 STREET, ST	: 302					
			Address				202	
		SOUTH MIAMI, FLORID	A 33143			ALL	2020 SEP -8	`T]
			City/State and Zip Code					ר س
		SALONSO@SMAPROFES						
		E-mail address: (to be used for future annual r	eport notification)		(T),		J
For furt	ther information c	oncerning this matter, please e	ıll:			<u>n</u> .	AH 6: 42	-
SUZEI	ITE ALONSO			-9669		p ri	\sim	
	Name o	f Person	at () Area Code	Daytime Telepho	one Number			
Enclose	ed is a check for th	he following amount:						
■ \$25.00 Filing Fee □ \$30.00 Filing Fee & Certificate of Status		Certified Copy Certifica (additional copy is enclosed) Certified		Certificate Certified C	ate of Status &			
	<u>Mailing Addres</u>	<u></u>	Street Ad	ldress:				

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Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

P\$R DEVELOPMENT SOLUTIONS LLC

(<u>Name of the Limited Liability Company as it now appears on our records.</u>) (A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 03/01/2018 _______ and assigned Florida document number 1.18000054401

This amendment is submitted to amend the following:

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 "LLC"

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(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:

Name of New Registered Agent:			2.	
New Registered Office Address:			ę:	
	Enter Florida street address	ردیا رو	£5	
	, Florid:	1		
	City	Zip	Code	

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, <u>enter the title, name, and address of each person</u> being added or removed from our records:

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MGR = Manager AMBR = Authorized Member

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Title	<u>Name</u>	Address	Type of Action
MGR	JAVIER GUZMAN	9240 SUNSET DRIVE, STE 237	≣ ∆da
		MIAMI, FL 33173	[]Remove
			Change
			🖸 Add
			[]Remove
		<u> </u>	🖾 Change
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

E. Effective date, if other than the date of filing: 09/02/2020 (optional) (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated SEPTEMBER 2

2020

Signature of a member or authorized representative of a member

Typed or printed name of signee