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(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:		
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SECRETARY OF STATE DIVISION OF CORPORATIONS

M COOPER JUL 2 6 2018

COVER LETTER

TO:

	Registration Se Division of Cor			
SUBJEC	G & D PPE	ECILC		
SUBJEC	·	Name of Lim	ited Liability Company	
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing	
		indence concerning this matter		
		Gerardo Diaz MD		
			Name of Person	
		G & D PPEC LLC		
			Firm/Company	
		22112 SW 130th Court		
			Address	
		Miami/Florida 33170	Name of Person Firm/Company Address City/State and Zip Code to be used for future annual report notification)	
			City/State and Zip Code	
		gdppec@gmail.com E-mail address: (to be used for future annual report no	tification)
For furth	er information c	oncerning this matter, please ca	·	
Marcelo		·	786 5548494	
	Name o	f Person		me Telephone Number
Enclosed	Lis a check for th	ne following amount:		
□ \$25.0	00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status & Certified Copy
	Registr Divisio P.O. Bo	ING ADDRESS: ration Section on of Corporations ox 6327 ussee, FL 32314	Registration Secti Division of Corpo Clifton Building	ion orations

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limi	ted Liability Comp (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited I. Torida document number <u>L18000164760</u>	iability Company	were filed on 07/09/2018	and assigned
This amendment is submitted to amend the following	lowing:		
A. If amending name, enter the new name o	of the limited lial	oility company here:	
he new name must be distinguishable and contain the	words "Limited Liab	ility Company," the designation "LLC" or t	he abbreviation "L.L.C."
Enter new principal offices address, if applic	cable:	22112 SW 130th Court, Miami F	lorida, 33170
Principal office address MUST BE A STREE	ET ADDRESS)	 	
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX)		22112 SW 130th Court, Miami F	lorida, 33170
B. If amending the registered agent and egistered agent and/or the new registered of New Registered Agent:	• • •	re:	nter the name of the
New Registered Office Address:	22112 SW 13	30th Court	F 19
New Registered Office Address.		Enter Florida street address	72
	Miami	, Florid	a 33170
New Registered Agent's Signature, if changing		City	Zip Code 📜

New Registered Agent's Signature, it 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:

MGR = Manager AMBR = Authorized Member

Title _.	<u>Name</u>	Address	Type of Action
MGR	Gerardo Diaz MD	22112 SW 130th Court	⊒ Add
•		Miami Florida, 33170	□ Remove
			Change
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			□ Remove
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	formation, enter change(s) here: (Attach additional sheets, if necessary.)	
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		CORPORATION
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Note: If the date inserted in	an the date of filing:	5.0207 ed as
e record specifies a de The 90th day after th	elayed effective date, but not an effective time, at 12:01 a.m. on the earlier record is filed.	er of
ated	. 2018	
	Signature of a member or authorized refresentative of a member	

Page 3 of 3

Filing Fee: \$25.00