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Division of Corporations

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN PINEAPPLE CREATIVE AGENCY LLC

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EXAMINER

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Help

## ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

Pineapple Creat	ive acro	of LC company)	r records.)	·		
The Articles of Organization for this Limited Liability Florida document number	Company were till			end ass	figned	
This amendment is submitted to amend the following:						
A. If amending name, enter the new name of the lin	nited liability com	ipany here;				
The new name must be distinguishable and compin the words "Lis	nited Liability Compo	iny," the designation	on "LLC" or the s	obtraviation "L	L.C."	
Enter new principal offices address, if applicable:	*****				N2 ·	
(Principal office address MUST BE A STREET ADD	RESS)			· .	==	-
	<b>***********</b>			意義	DE	~ ·-;
Enter new mailing address, if applicable:	<del></del>			48.57 78.67	<u> </u>	[
(Mailing address MAY BE A POST OFFICE ROX)	·			<u> </u>	A	<u> </u>
			<del> </del>	<u>⊃ = 1</u>	<u></u>	
B. If amending the registered agent and/or registered agent and/or the new registered office ade	stered office add tress here:	iress o <b>o</b> ome r	ecords, <u>eater</u>	the name	of the	рсуу
Name of New Registered Agent: G	abriel Edu	ardo Esp	aitlat	<del></del>	~·	_
New Registered Office Address:	7343 Lak	Enter Florida street	addove		·····	-
	Donal	and the street street	Florida	23166		
New Registered Agent's Signature if changing Registered	Cary		_	Zip Cade		_

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

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If amending Authorized Person(s) authorized to manage, suter 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
AR	Gabriel G Famillat	2343 Lake Dr, 208	D Add
		Doral, FL 33146	Remove
		-	D Change
<u>P</u>	Gabriel E Espailbo	•	B Add
		Doral, FL 33146	
			Change
			Add P
			D'Change
			AM Chamago
			→ D Add O
			O Remove
			D Change
			D Acu
			D Remove
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ffective date, if other than the date of filing:  an effective date is tisted, the date must be specific and carnot be prior to date of filing or me ote; If the date inserted in this block does not meet the applicable statutory filing occument's effective date on the Department of State's records.	(Optional) wathan 90 days after filing.) Pursuant to 605. requirements, this date will not be liste	020. n be
record specifies a delayed effective date, but not an effective ti The 90th day after the record is filed.	me, at 12:01 a.m. on the earlie	er o
ated		

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