K180002399957

(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:

Office Use Only



200387908442

05/23/22--01024--014 **80.00

22 MAY 23 PM 2: LS

T. MATTHEWS

COVER LETTER

	Registration Se Division of Cor			
SUBJEC	PFG Partne	rs LLC		
SUBJEC		Name of Lim	ited Liability Company	
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	eturn all correspo	ondence concerning this matter	to the following:	
		Anthony Castiglione		
			Name of Person	
			Firm/Company	
		7020 Professional Pkwy E	Unit 103	
			Address	
		Sarasota FL 34240		
			City/State and Zip Code	
		acastiglione@iaanswers.cor		
			to be used for future annual report not	ification)
For furth	er information c	oncerning this matter, please ca	all:	
Anthony	Castiglione		941 3505601 at ()	
	Name o	f Person	Area Code Daytin	ne Telephone Number
Enclosed	l is a check for th	ne following amount:		
■ \$25.0	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 Addres Registration S		<u>Street Address:</u> Registration Sc	ection
	Division of C		Division of Co	

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

ARTICLES OF AMENDMENT TO SECRETARY OF STATE ARTICLES OF ORGANIZATION OF '22 MAY 23 PM 2: 46

PFG Partners LLC			
(<u>Name of the Limited Liab</u> (A Flori	ility Company as it now appears on our records.) da Limited Liability Company)		
The Articles of Organization for this Limited Liability Florida document number $\frac{\text{L}18000289957}{\text{L}18000289957}$	Company were filed on 12/18/2018 and assigned		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lir	nited liability company here:		
he new name must be distinguishable and contain the words "Li	mited Liability Company," the designation "LLC" or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:	7020 Professional Pkwy E		
Principal office address MUST BE A STREET ADD	ORESS) Unit 103		
	Sarasota FL 34240		
Inter new mailing address, if applicable:	14280 SW 142nd St Suite 208		
Mailing address MAY BE A POST OFFICE BOX)	Miami fl 33186		
 If amending the registered agent and/or registeregent and/or the new registered office address here: 	ed office address on our records, <u>enter the name of the new registero</u> :		
Name of New Registered Agent: Anth	Anthony Castiglione		
New Registered Office Address: 7020	Professional Pkwy E		
	Enter Florida street address		

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.

City

Sarasota

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
	Andrew Sell	2117 47th St	□Add
		Sarasota FL 34234	■Remove
			□Change
			□ Add
			□Remove
			□Change
			□Add
			Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
	-		□Add
			□Remove
			□ Change

-7	<u>arew</u>	<u> 1811</u>	<u> }</u>	no	longer	<u>. An</u>	owner	or
M	einter	OF	- Thi	5 L	LC_			
		_	<u> </u>					
	- ''				<u></u>		<u>. </u>	
								
	_							
					-	_		
	•						<u> </u>	
	<u> </u>							
								1
								
								
			 .	<u>_</u>	<u></u>			
-	<u>. </u>				-		<u>_</u>	
								
ective d	ate, if othe	r than th	a duta af i	filiza			,	
reffective <u>te:</u> If the	date is listed,	the date mu ed in this b	ist be specifi Hock does	ic and cannot not meet t	ot be prior to date he applicable s	of filing or tatutory fili	more than 90 days at ing requirements.	Monal) fter filing.) Pursuant to 605,0207 (3) this date will not be listed as the
cord spe	cifies a delay	ved effecti	ve date, bu	t not an el	ffective time, as	t 12:01-a.m	, on the earlier of:	(b) The 90th day after the
s filed.								
ed	2022	1						
		/			·			
	/							
_	/- -	_		·	er or authorized			

Typed or printed name of signee