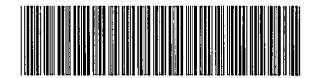
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COVER LETTER

SUBJECT:	PKD, LLC					
	Name of Lim	ited Liability Company				
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please return all correspo	ndence concerning this matter	to the following:				
		Carlos Colon-Machargo, Esq.				
		Name of Person				
	Co	lon-Machargo Law Studio, LLC				
		Firm/Company				
		PO Box 14855				
		Address				
	Atlanta GA 30324					
	City/State and Zip Code					
		arlos@colonmachargolaw.com to be used for future annual report notif	ication)			
Dan Ganton in Comment		·	reality)			
ror turtner information c	oncerning this matter, please ca	a11;				
Carlos Colo	n-Machargo, Esq.	at (404)507-205	0			
Name o	f Person	Area Code Daytime	Telephone Number			
Enclosed is a check for th	ne 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:

TO:

Registration Section Division of Corporations

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FI. 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

	PKD, LLC		
(<u>Name of the Limited Liab)</u> (A Flori	ility Company as it now appea da Limited Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Liability Florida document number		01/22/2019	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lir	mited liability company h	ere:	
The new name must be distinguishable and contain the words "Li	imited Liability Company," the c	designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADD	ORESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		<u>-</u>	
B. If amending the registered agent and/or reg registered agent and/or the new registered office ad		our records, ente	The Tame of the
Name of New Registered Agent:			
New Registered Office Address:	Enter Flo	rida street address	10: 19
		, Florida	
	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 amenGng Authorized Person(s) authorized to manage, enter the title, name, and address of each person—being add or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AP	Carlos Colon-Machargo	PO Box 14855	Add
		Atlanta GA 30324	
			□ Change
			Add
			Remove
			Change
		·	_ _ \Add
			Remove 19906 - D AH D: 1990A AH ASSSEC FLORIDA
			Change Co. A. M. Co. B. Add Co. B. Add
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If an effective date is Note: If the date	f other than the date s listed, the date must be sp inserted in this block do tive date on the Departr	ecific and cannot boos not meet the	applicable statu	filing or more thar tory filing requi	(optiona) 190 days after fili rements, this da	nl) ng.) Pursi	aint to 6	
	ifies a delayed effe y after the record i		ut not an eff	ective time,	at 12:01 a.m	n. on th	ne ear	lier o
Dated	July 29							
	Signa	une of a member of	1 authorized repr	- Mccha esenthise of a mo	mber		.	
	Signa	une of a member of	authorized repr	esentitive of a mo	mber			
		Carlos Colo						

Page 3 of 3

Filing Fee: \$25.00