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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LUPA ENTERPRISES INC

Account Number : I20200000050 ; (727)568-0387 Phone Fax Number : (727)298-8007

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address: INFO@USACORPORATIONSERVICES.COM

LLC REGISTERED AGENT CHANGE **PGC VENTURES LLC**

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	PGC VENTURES LLC			<u> </u>
(Name of the Limit	ed Liability Company as it now appr (A Florida Limited Liability Company	ars on our records.)	~	1101
The Articles of Organization for this Limited Li Florida document number L19000028115	iability Company were filed on	01/28/2019	and assigned	
This amendment is submitted to amend the following	owing:			
A. If amending name, enter the new name o	f the limited liability company	<u>here</u> :		
The new name must be distinguishable and contain the venture new principal offices address, if application of the distinguishable and contain the venture new principal office address MUST BE A STREE	eable:			- -
Enter new mailing address, if applicable:		.		- -
(Mailing address MAY BE A POST OFFICE	<u>BOX</u> 1			_
B. If amending the registered agent and/or agent and/or the new registered office address.	registered office address on ou	r records, enter the I	name of the new regist	<u>ered</u>
Name of New Registered Agent:	LUPA ENTERPRISES INC			_
New Registered Office Address:	600 CLEVELAND STREET #	: 393 Florida street adáress		_
	CLEARWATER	, Florida	a 33755	_
	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

Sep 21 20, 08:08a

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	Nume	Address	Type of Action
			⊡Add
			[]Remove
			Change
			⊡Add
			□Remove
			□Remove
	·		□Change
			🖸 Adú
			☐ Change
			□Remove
			□Add
			□Remove
			☐ Change

amendin	g any other information, enter change(s) here: (Attach additional sheets, if necessary.)
<u></u>	
-	
_	
Effective	date, if other than the date of filing:
	ive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days and thing, I make the date is listed, the date in this block does not meet the applicable statutory filing requirements, this date will not be listed the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed the date on the Department of State's records.
he record s ord is filed	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (a) The 90th day after the
Dated _	SEPTEMBER 18 2020
_	D C B L
	Signature of a member or authorized representative of a member
	·
	ALFONSO BITTIG, GERMAN RICARDO Typed or printed paine of signed