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COVER LETTER

Division of Cor	porations		
CUDIECT.	PACIFICUS HOMES	LLC	
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	indence concerning this matter	to the following:	
	Cristian Ortiz Reyes		
		Name of Person	
	Pacificus Homes LLC		
		Firm/Company	
	777 Brickell Ave. suite 12	10	
		Address	
	Miami, Florida, 33131		
	arielarrocha@gmail.com	City/State and Zip Code	
	·		
For further information c	oncerning this matter, please ca	all;	
Cristian Ortiz Reyes		954 353 0013 at ()	
Name o	f Person	Area Code Daytime	Telephone Number
Enclosed is a check for U	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

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassec, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PACIFICUS HOMES LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) February 1, 2019 The Articles of Organization for this Limited Liability Company were filed on ___ and assigned L19000033203 Florida document number This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: N/A The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." N/A Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) N/A Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: N/A Name of New Registered Agent: New Registered Office Address: Enter Florida street address . Florida

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

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
MGR	Tilio A. Paz Urdaneta	1865 Brickell Ave, suite A 1732	
			■ Remove
			☐ Change
MGR	Tulio A Paz Urdaneta	1865 Brickell Ave. suite A 1732	■ Add
			Remove
			Change
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Effective date, if other than the (If an effective date is listed, the date must Note: If the date inserted in this blo document's effective date on the Do	be specific and cannot be prior to ck does not meet the applica	w date of filing or more th ble statutory filing req	(optional) an 90 days after filing.) Pu uirements, this date wil	arsuant to 605.0207 (3)(b) Il not be listed as the
he record specifies a delayed The 90th day after the reco	effective date, but not ird is filed.	an effective time	, at 12:01 a.m. on	the earlier of:
February 15 Dated	2019	_ •		
	\sim \sim	_		
<i>[n</i>	Signature of a member or author	2 Deed representative of a r	nember	
,	0	•		
Cristian Ortiz	-	I name of signee		 _

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Filing Fee: \$25.00