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CHANGE CORPORATION

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COVER LETTER

Division of Corporations
SUBJECT: PEP Invostment Properties LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Auther Singleton-Taylor PEP Investment Properties LLC Firm/Company 4448 NW 8th Court Address Plantation FL 33317 City/State and Zip Code AS MARKET THE QUARTER COMP E-mail address: (to be used for future/annual report notification)
For further information concerning this matter, please call:
Author Singleton-Taylora (954-) 243-44-03 Name of Person Name of Person
Enclosed is a check for the following amount:
\$25.00 Filing Fee Solutional copy is enclosed Score (additional copy is enclosed) \$50.00 Filing Fee Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed)

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TETINVESTME	nt Properties LLC 5
(<u>Name of the Limited Liahi</u> (AlFlorid	da Limited Liability Company)
The Articles of Organization for this Limited Liability Florida document number <u>L19000135</u>	Company were filed on March 15, 2019 and assigneds
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the lin	nited liability company here:
The new name must be distinguishable and contain the words "Li	mited Liability Company," the designation "L.L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	····
Principal office address MUST BE A STREET ADD	PRESS)
Enter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registere agent and/or the new registered office address here:	ed office address on our records, <u>enter the name of the new registered</u>
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida
	City Zin 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 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	Autier Singleton-Tax	ylor 4448 NW 8-th Ct.	_ DAAdd
		 	□Remove
			□Change
AP Theresa Sing	Theresa Singleton	4209 #209	□Add
		# Z09 	& Remove
		 	□Change
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(If an eff	ive date, if other than the date of filing:
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	Wember 27th. 2019. Cutter Structure of a member of a member
	Autier Singletin-Taylor Typed or printed name of signee

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Filing Fee: \$25.00