

L190000 94342

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

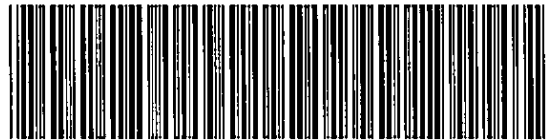
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2019 MAY 15 PM 1:40
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Amend/cus
Name chg

MAY 30 2019
I ALBRITTON

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: PERISOSS INVESTMENTS, 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:

ELIEZER DURAN

Name of Person

DURAN GROUP & ASSOCIATES, P.A.

Firm/Company

1001 N FEDERAL HWY, SUITE 355

Address

HALLANDALE BEACH, FL 33009

City/State and Zip Code

INFO@DURANGROUPPA.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ELIEZER DURAN

786- 277-9634

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|---|--|--|--|

MAILING ADDRESS:

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
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

PERISSOS INVESTMENTS, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 04/05/2019 and assigned
Florida document number L19000094342.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

PERISSOS INVESTMENTS, LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

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:

Name of New Registered Agent: DURAN GROUP & ASSOCIATES, P.A.

New Registered Office Address: 1001 N FEDERAL HWY, SUITE 355
Enter Florida street address

HALLANDALE BEACH, Florida 33009
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 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>	<u>Address</u>	<u>Type of Action</u>
MGRM	PIERANGELO MONTAUTI	3750 SAN SIMEON CIR	<input checked="" type="checkbox"/> Add
		WESTON, FL 33331	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	ALDRYN D. PATIAÑO D	2887 SW 128TH WAY	<input type="checkbox"/> Add
		MIRAMAR, FL 33027	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	ALDRYN D. PATINO	2887 SW 128TH WAY	<input checked="" type="checkbox"/> Add
		MIRAMAR, FL 33027	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

PM

[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

(b) The 90th day after the record is filed.

Dated 05/05, 2019

Signature of a member or authorized representative of a member

PIERANGELO MONTAUDI

Typed or printed name of signee