L19000171068

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क्षा वा १३		PAN AMERICAN INTERNATIONAL LLC				
SUBJECT:Name of Limited Liability Company						
The enc	losed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please r	eturn all correspo	indence concerning this matter	to the following:			
		Michael J. Barber, Esq.				
			Name of Person			
		Michael J. Barber P.A.				
			Firm/Company	· · · · · · · · · · · · · · · · · · ·		
		P. O. Box 421928				
		 	Address			
		Kissimmee, Fl. 34742				
		mjb957@embarqmail.com	City/State and Zip Code			
		E-mail address: (to be used for future annual	report notification)		
For furt	her information o	oncerning this matter, please o	all:			
Michae	l J. Barber, Esq		407 933 at ()	3-8212		
Name of Person		Area Code	Daytime Telephone Number			
Enclose	d is a check for t	he following amount:				
□ \$25	5.00 Filing Fce	☐ \$30.00 Filing Fee &	□ \$55.00 Filing Fee &	% □ \$60.00 Filing		

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Registration Section Division of Corporations P.O. Box 6327 Tallahassec, FL 32314

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

ARTICLES OF AMENDMENT TO

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ARTICLES OF ORGANIZATION SECRETARY OF STATE

PAN AMERICAN INTERNATIONAL 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 July 19,2019 and assigned Florida document number L19000177068 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: PAN AMERICAN RICE 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: 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.

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>	Name	Address	Type of Action
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ective date, if other than the effective date is listed, the date in te: If the date inserted in this	sust be specific and cannot be	prior to date of filing or m	ore than 90 days after filing	ig.) Pursuant to 605.020
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record specifies a delay The 90th day after the rested August 12,		Esg.		

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Filing Fee: \$25.00