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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
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C. GOLDEN 00T 12 2019

COVER LETTER

PK Forest SUBJECT:	Investments LLC		
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspondence	ondence concerning this matter	to the following:	
	James W. Kern		
		Name of Person	
	PK Forest Investments LLC	2	
		Firm/Company	
	1550 Madruga Ave., Suite	130	
		Address	
	Coral Gables, FL 33146		
	jimkern@thekerncompany.c	City/State and Zip Code com	
	E-mail address: (t	to be used for future annual report notif	ication)
For further information of	concerning this matter, please ca	ill:	
James W. Kern		305 717-1800	
Name o	of Person	at ()	Telephone Number
Enclosed is a check for t	he following amount:		
\$25,00 Filing Fee	☐ \$30,00 Filing Fee & Certificate of Status	☐ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	(Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section Division of Corporations

> 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

T.D

(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) ne Articles of Organization for this Limited Liability Company were filed on August 2nd. 2019 orida document number L19000197601 nis amendment is submitted to amend the following:	019 SFP 26 AM 10: 54
orida document number L19000197601	
nis amendment is submitted to amend the following:	and assigned
If amending name, enter the new name of the limited liability company here:	
e new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or	the abbreviation "L.L.C."
nter new principal offices address, if applicable:	
rincipal office address MUST BE A STREET ADDRESS)	
nter new mailing address, if applicable:	
Aailing address MAY BE A POST OFFICE BOX)	
If amending the registered agent and/or registered office address on our records, encords agent and/or the new registered office address here:	enter the name of the nev
Name of New Registered Agent:	
New Registered Office Address: Enter Florida street address	
Enar v torida street address	
Floric	la

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

A 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>	Type of Action
AMBR	Adam Papka	P.O. Box 1921 Lake City, FL 32056	
			Remove
			☐ Change
		·	Remove
			Change
		·	Add
			Remove
			□ Change
			Remove
			☐ Change
			Remove
			Change
			Add
			☐ Remove
			Change

		-	
			
			
			
 			
E. Effective data if when the	and the date of fillings	(- · · · · ·	
Note: If the date inserted in	date must be specific and cannot be prior to n this block does not meet the application the Department of State's records.	odate of filing or more than 90 days after ble statutory filing requirements, this	filing.) Pursuant to 605.0203
If the record specifies a d (b) The 90th day after t	elayed effective date, but not he record is filed.	an effective time, at 12:01 a	.m. on the earlier o
Dated September 18th	2019		
, suice	-1-1	. ·	
(

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00