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Certified Copies	_ Certificates	s of Status
Carairi Instructions to	Cities Officer	
Special Instructions to	Filing Officer.	

Office Use Only



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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

P&L INVESTMENTS & MANAGEMEN		
(Name of the Limited Liability Company as it now appears on (A Florida Limited Liability Company)	our records.)	
The Articles of Organization for this Limited Liability Company were filed on Florida document numberL19000203635	08/09/19	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability company here:		
The new name must be distinguishable and contain the words "Limited Liability Company," the design	nation "LLC" or the ab	breviation "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 reco	rds, <u>enter the nam</u>	e of the new registered
agent and/or the new registered office address here:		2021 r
Name of New Registered Agent:		<u> </u>
New Registered Office Address:		***
Enter Florida	street address	y y y y y y y y y y y y y y y y y y y

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
AMBR	RICARDO LEONCINI	16634 AMBASSADOR BRIDGE RD.	□Add
		DELRAY BEACH, FL 33446	
			□Change
			□Add
			Remove
			🗆 Change
			[]Add
			□Remove
			Change
			□Add
			□Remove
			□Change
 -			🗀 Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

). If am	sending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	
Note:	tive date, if other than the date of filing: (optional) flective 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) If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ment's effective date on the Department of State's records.
f the reco	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the filed.
Dated	
	Signature of a member or authorized representative of a member
	WAGNER PONTES LIMA
	Typed or printed name of signee