

L19000242149

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

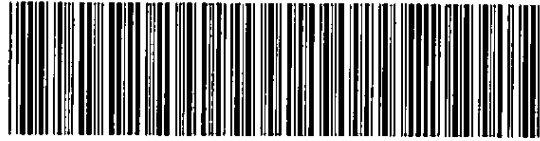
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10/22/19--01012--029 **25.00

FILED
2019 OCT 22 AM 8:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Y. SULKER
NOV 18 2019



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 14, 2019

PBIJ LLC
13526 VILLAGE PARK DR SUITE 207
ORLANDO, FL 32837

SUBJECT: PBIJ LLC
Ref. Number: L19000242149

We have received your document for PBIJ LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FOREIGN LLC, but your entity is a FLORIDA LLC. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Yasemin Y Sulker
Regulatory Specialist III

Letter Number: 919A00023451

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PBIS LLC
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Juanita Santiago
Name of Person

PBIS LLC
Firm/Company

13526 Village Park Dr suite 202
Address

Orlando FL 32837
City/State and Zip Code

juanitajenny.santiago@gmail
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Juanita Santiago at (407) 398 9689
Name of Person Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

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

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

- ☒ \$25 Filing Fee ☐ \$30 Filing Fee & Certificate of Status ☐ \$55 Filing Fee & Certified Copy ☐ \$60 Filing Fee, Certificate of Status & Certified Copy

CR2E055 (9/15)

Ch #
1009

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

original date

1111111111
(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 9/25/19 and assigned
Florida document number 19900242149.

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 designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

13826 Wilcox Blvd N
Suite 200
Littleton, CO 80120

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

PO Box 12345
Littleton, CO 80120

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:

Jonathan Hernandez

New Registered Office Address:

2915 Arbor Park Ave

Enter Florida street address

Mesa

City

Florida

84715

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.

[Signature]
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>
<u>MGR</u>	<u>[Name]</u>	<u>[Address]</u>	<input type="checkbox"/> Add
		<u>[Address]</u>	<input type="checkbox"/> Remove
		<u>[Address]</u>	<input checked="" type="checkbox"/> Change
<u>AMBR</u>	<u>[Name]</u>	<u>[Address]</u>	<input checked="" type="checkbox"/> Add
		<u>[Address]</u>	<input type="checkbox"/> Remove
		<u>[Address]</u>	<input type="checkbox"/> Change
<u>MGR</u>	<u>[Name]</u>	<u>[Address]</u>	<input type="checkbox"/> Add
		<u>[Address]</u>	<input checked="" type="checkbox"/> Remove
		<u>[Address]</u>	<input type="checkbox"/> Change
<u>AMBR</u>	<u>[Name]</u>	<u>[Address]</u>	<input type="checkbox"/> Add
		<u>[Address]</u>	<input checked="" type="checkbox"/> Remove
		<u>[Address]</u>	<input type="checkbox"/> Change
		<u>[Address]</u>	<input type="checkbox"/> Add
		<u>[Address]</u>	<input type="checkbox"/> Remove
		<u>[Address]</u>	<input type="checkbox"/> Change
		<u>[Address]</u>	<input type="checkbox"/> Add
		<u>[Address]</u>	<input type="checkbox"/> Remove
		<u>[Address]</u>	<input type="checkbox"/> Change

[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 605.0297 (3)(b)

If the record 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 record is filed.

Signature of a member or authorized representative of a member

John J. [unclear]

Typed or printed name of signee ()