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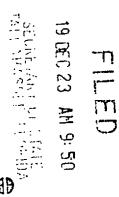
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Registration Section

Tallahassee, FL 32314

TO:

Divis	sion of Cor	porations				
	D.E. PINNACLE INVESTORS, LLC					
SUBJECT: _		Name of Lim	ited Liability Company			
The enclosed	Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return a	all correspo	ondence concerning this matter	to the following:			
		Dynasty J. Ortega				
			Name of Person			
		D.E. PINNACLE INVEST	ORS, LLC			
			Firm/Company	-		
	11531 NW 43RD CIRCLE B118					
	Address					
	OCALA/FLORIDA 34482					
		City/State and Zip Code				
		Straightforwardandeasy@gi		=		
		É-mail address: (to be used for future annual	report notification)		
For further inf	formation c	oncerning this matter, please co	all:			
Dynasty J. Or	1ega			50741		
	Name o	f Person	Area Code	Daytime Telephone N	Number	
Enclosed is a	check for t	he following amount:				
□ \$25.00 Fi	ling Fee	■ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee Certified Copy (additional copy is end	Ce closed) Ce	0.00 Filing Fee, entificate of Status & entified Copy ditional copy is enclosed	
	ing Addres		Street A			
_	istration (ision of C	Section Corporations	-	Registration Section Division of Corporations		
	Box 632	-		ntre of Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

D.E. PINNACLE INVESTORS, LLC			
(Name of the Limited Liability Compa (A Florida Limited	i <mark>ny as it now appears on our i</mark> Liability Company)	records.)	
The Articles of Organization for this Limited Liability Company Florida document number L19000257415	were filed on 10/14/2019		and assign
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation	"LLC" or the al	obreviation "L.L.C
Enter new principal offices address, if applicable:		-1	
(Principal office address MUST BE A STREET ADDRESS)			<u> </u>
		2 2	
Enter new mailing address, if applicable:	P.O. Box 82	_	M
(Mailing address MAY BE A POST OFFICE BOX)	Lowell, Florida 32663	<u> </u>	
		1	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>s</u>	enter the nam	e of the new r
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida street o	address	
		, Florida	
	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 provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this docume 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 amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person bein or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Ac
MGR	Dynasty J. Ortega	11531 NW 43RD CIRCLE B118	≣ Add
		OCALA, FLORIDA 34482	□Remov
			□Change
AMBR	Dynasty J. Ortega	11531 NW 43RD CIRCLE B118	= Add
		OCALA, FLORIDA 34482	□Remove
		・	C TDChange
			A TOAdd
			Si □ Remov
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	(antional)
Effective date, if other than the date of filing:	f filing or more than 90 days after filing.) Pursuant to 6
<u>Note:</u> If the date inserted in this block does not meet the applicable state document's effective date on the Department of State's records.	utory filing requirements, this date will not be li
document's effective date on the Department of State's records.	
he record specifies a delayed effective date, but not an ef The 90th day after the record is filed.	fective time, at 12:01 a.m. on the ear
Dated	
Ignature of a member of authorized rep	12-15-2019

Typed or printed name of signee