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| | (Requestor's Name) | |
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| | (City/State/Zip/Phone #) | |
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| | (Business Entity Name) | - |
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| Special Instructions to | n Filing Officer | |
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2022 SEP 29 AH 11: 41

A. RAMSEY SEP 30 2022 CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Tallhassee, FL 3230 Phone: 850-558-1500

| ACCOUNT NO. | : I2000000195 |
|--|----------------------|
| REFERENCE | : 979215 7954862 |
| AUTHORIZATION | il had |
| COST LIMIT | Spelleran S 55.00 |
| ORDER DATE : September 28, 202 | 2 |
| ORDER TIME : 8:30 AM | |
| ORDER NO. : 979215-005 | |
| CUSTOMER NO: 7954862 | |
| DOMESTIC AM NAME: PMG WORLDWIDE, | ENDMENT FILING LLC |
| EFFECTIVE DATE: | |
| XX ARTICLES OF AMENDMENT RESTATED ARTICLES OF INCO | RPORATION |
| PLEASE RETURN THE FOLLOWING AS | PROOF OF FILING: |
| XX CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STA | NDING |

EXAMINER'S INITIALS:

CONTACT PERSON: Alexxis Weiland -- EXT#

COVER LETTER

TO:

| TO: Registration Division of C | | | |
|---|---|---|---|
| | orldwide, LLC | | |
| SUBJECT: | Name of Lim | ited Liability Company | |
| The enclosed Articles | of Amendment and fee(s) are sub | omitted for filing. | |
| Please return all corres | spondence concerning this matter | to the following: | |
| | Isabella Padilla | | |
| | | Name of Person | |
| | PMG | | |
| | | Firm/Company | |
| | 398 NE 5th Street, 13th | Floor | |
| | | Address | |
| | Miami, FL 33132 | | |
| | | City/State and Zip Code | |
| | legal@propertymg.com | | |
| | E-mail address: (| to be used for future annual report not | ification) |
| For further information | oconcerning this matter, please c | all: | |
| Lowell Plotkin | | 305 384-6712 | |
| Name | e of Person | Area Code Daytin | ne Telephone Number |
| Enclosed is a check for | r the following amount: | | |
| ■ \$25.00 Filing Fee | S30.00 Filing Fee & Certificate of Status | ■ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | ☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| Mailing Add | | <u>Street Address:</u> Registration Se | etion |
| Registration Section Division of Corporations | | Division of Co | |
| P.O. Box 6327 | | The Centre of T | • |
| Tallahassee, FL 32314 | | 2415 N. Monroe Street, Suite 810 | |

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2822 SEP 29 AM 10: 21

PMG Worldwide, 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 12/10/2019 and assigned

Florida document number L19000300579

The Articles of Organization for this Limited Liability Company were filed on

Florida document number L19000300579

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 "LLC."

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)

By NE 5th Street

13th Floor

Miami, FL 33132

H. If amending the registered event and/or registered office address on our records, enter the name of the new registered office address on our records, enter the name of the new registered office address on our records, enter the name of the new registered office address on our records, enter the name of the new registered office address on our records, enter the name of the new registered office address on our records, enter the name of the new registered office address on our records and a stigned.

B. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new registered agent and/or the new registered office address here</u>:

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> | <u>Address</u> | Type of Action |
|--------------------|-------------------|-------------------|-----------------|
| AMBR Daniel Kaplan | 398 NE 5th Street | ■Add | |
| | 13th Floor | □ Remove | |
| | | Miami. FL 33132 | □ Change |
| AMBR | Ryan Shear | 398 NE 5th Steet | ■Add |
| | 13th Floor | | |
| | | Miami, FL 33132 | □Change |
| MGR | Daniel Kaplan | 1441 Brickell Ave | b ō bA |
| | Suite 1510 | ■Remove | |
| | Miami, FL 33131 | □Change | |
| MGR | Ryan Shear | 1441 Brickell Ave | □Add |
| | | Suite 1510 | ■ Remove |
| | Miami, FL 33131 | □Change | |
| | | □Add | |
| | | □Remove | |
| | | □Change | |
| | | □Add | |
| | | Remove | |
| | | □Change | |

| | e specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 k does not meet the applicable statutory filing requirements, this date will not be listed as |
|-----------------------|--|
| ed ic filad | date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the |
| September 28th Dated | 2022 |
| | At the second of |
| | gnature of a member or authorized representative of a member |
| Ryan Shear | |
| rtyan Onear | Typed or printed name of signee |

Filing Fee: \$25.00