

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet,

To:	Division of Co				
	Fax Number	(850)617-63	83		
Tron:					
	Account Name	CORPORATE C	REATIONS	INTERNATIONAL	INC.
	Account Mumber	11043200305	3		
	Phone	(561)694-81	07		
	Fax Number	(561)214-84	42		

.

Ester the email address for this business entity to be used for future annual report mailings. Enter only one email address plasse.

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN PENA RAMAS LAW PLLC

Certificate of Status	D
Certified Copy	0
Page Count	04
Batimated Charge	\$25.00

	Electronic Filing Menu	Corporate Filing Menu	Help	
				2023
2023 -				 ILLU FEB 22 PH

5:47

••.

EEB 50 5053

,

ARTICLES OF AMENDMENT TO : ARTICLES OF ORGANIZATION OF

PENA RAMAS LAW PLLC

(Name of the Limited Liability Company as it now appears on our records.) (A Florids Limited Liability Company)

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here;

Jennifer Peña Law PLLC

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)

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 records, enter the name of the new registered agent and/or the new registered office address here:

	 عبة`	2	
Name of New Registered Agent:		2023	
New Registered Office Address:			
	Enter Florida street address	22	
	, Florida	<u>.</u>	<u> </u>
	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 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>	Name	Address	Type of Action
MGR	RAMAS, KEVIN A	150 SE 2ND AVE, STE 300 MIAMI, FL 33131	🖸 Add
		-	=Remove
			□Change
			🗆 Add
			□Remove
			🗆 Change
			🗆 Add
			CRemove
			□Change
		<u></u>	
			🖾 Remove
			Change
<u> </u>		<u> </u>	🗆 Add
			⊡Remove
			□Change
·		·	🖸 Add
			🗆 Remove
			Change

• • •

· · · · · ·	
······································	

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

E. Effective date, if other than the date of filing: ______(optional) (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 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.

Dated February 22	2023
	an
	ah
	Signature of a member or authorized representative of a member

Ariana Turoski, Attorney-in-fact

Typed or printed name of signee