## 20000 11/674

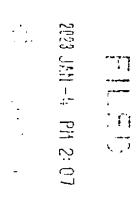
(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	
fied Copies Certificates of	Status
ecial Instructions to Filing Officer:	

Office Use Only

A RIVERS



900389831609



01/24/23--01009--010 \*\*60.00

()

9 1:1:1:49

## **COVER LETTER**

:

Registration Section
Division of Corporations

P AND P GLOBAL VENTURES LLC BJECT: Name of Limited Liability Company enclosed Articles of Amendment and fee(s) are submitted for filing. ase return all correspondence concerning this matter to the following: Fariba Byhardt Name of Person Firm/Company E-mail address: (to be used for future annual report notification) further information concerning this matter, please call: Daytime Telephone Number Name of Person losed is a check for the following amount: \$25.00 Filing Fee □ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certificate of Status Certificate of Status & Certified Copy Certified Copy (additional copy is enclosed) (additional copy is enclosed) Mailing Address: **Street Address:** Registration Section Registration Section Division of Corporations **Division of Corporations** P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

P AND P GLOBAL VENTURES LLC
(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Li	imited Liability Company)		
Articles of Organization for this Limited Liability Con	mpany were filed on <u>041241202</u>	20 and assigned	d
rida document number <u>L20000111674</u>			
is amendment is submitted to amend the following:			
If amending name, enter the new name of the limite	d liability company here:		
new name must be distinguishable and contain the words "Limited	d Liability Company," the designation "LLC" or the	abbreviation "L.L.C."	<del></del>
ter new principal offices address, if applicable:			
incipal office address MUST BE A STREET ADDRE	SS)		
			<del></del>
and the state			
ter new mailing address, if applicable:			
ailing address MAY BE A POST OFFICE BOX)			
		. 29	
If amending the registered agent and/or registered of	office address on our records, <u>enter the na</u>	me of the new reg	istered
ent and/or the new registered office address here:		J.A.N	1;
Name of New Registered Agent:		<u>.</u>	
			<del></del> !-;
New Registered Office Address:	Enter Florida street address		<u> </u>
	Florido	07	
	, Florida _ City	Zip Code	
v Registered Agent's Signature, if changing Registered A	Agent:		
ereby accept the appointment as registered agent an wisions of all statutes relative to the proper and compet the obligations of my position as registered agent agent to merely reflect a change in the registered appropriate to merely reflect a change in the registered appropriate to merely reflect achange in the registered appropriate the propriate that the change is the change.	aplete performance of my duties, and I am nt as provided for in Chapter 605, F.S. Oi	familiar with an	d
i	If Changing Registered Agent, Signature of New R	legistered Agent	

amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added removed from our records:

GR = Manager

4BR = Authorized Member

<u>ile</u>	Name	Address	Type of Action
GR	PHILLIPS, RAMON	912 Denton Blvd WW	_ □Add
		1909 Fortwalton Beach FL	_ <b>≣</b> Remove
		32547	_ □Change
		•—————————————————————————————————————	_ 🗀 Add
			_ □Remove
			_ □Change
			_ 🗆 Add
			_ □Remove
		<del></del>	_ □Change
<del></del>			_ 🗆 Add
			_ □Remove
			_ □Change
<del></del>			_ □Add
			_ 🗆 Remove
			_ Change
			_ □Add
		<del></del>	_ □Remove
			_

		,	
	<del> </del>		
<del></del>	·		· · · · · · · · · · · · · · · · · · ·
		<del></del>	
<u> </u>		, .	1. 1
		· · · · · · · · · · · · · · · · · · ·	
			<del>.</del>
			<u> </u>
ctive date, if other than the da	te of filing:	(options	al)
ctive date, if other than the da effective date is listed, the date must be If the date inserted in this block iment's effective date on the Depar	does not meet the applicable st	of filing or more than 90 days after fili atutory filing requirements, this da	ng.) Pursuant to 605.0207 ate will not be listed as
	ate, but not an effective time. at	12:01 a.m. on the earlier of: (b)	The 90th day after the
filed.	ate, but not an effective time, at	12:01 a.m. on the earlier of: (b)	The 90th day after the
filed.		12:01 a.m. on the earlier of: (b)	The 90th day after the
ed	2023 http://		The 90th day after the
filed. d			The 90th day after the

. If

Filing Fee: \$25.00