

L20000123365

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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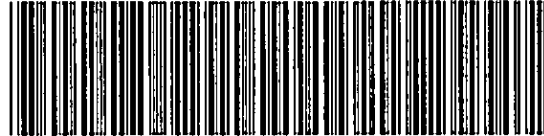
(Business Entity Name)

(Document Number)

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C. BRUMBLEY

DEC 27 2021

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: THE PEMBROKE & GROSVENOR MANAGEMENT, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Heana Arias Tovar, Esq.

Name of Person

Arias Tovar & Associates, P.A.

Firm/Company

12781 Miramar Pkwy Ste 203

Address

Miramar, FL 33027

City/State and Zip Code

harias@ariastovar.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Heana Arias Tovar, Esq.

954 385 2284

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 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 Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

THE PEMBROKE & GROSVENOR MANAGEMENT, 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 05/11/2020 and assigned
Florida document number L20000123365.

This amendment is submitted to amend the following:

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

None

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:

None

(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:

Name of New Registered Agent:

NORIEGA FLOREZ, MAURICIO H.

New Registered Office Address:

12781 Miramar Pkwy #203

Enter Florida street address

Miramar

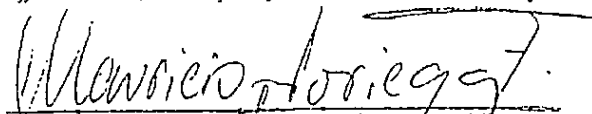
, Florida 33028

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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	GONZALEZ HERRERO, JUAN	12781 MIRAMAR PKWY., SUITE 203	<input type="checkbox"/> Add
		MIRAMAR, FL 33027	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	NORIEGA FLOREZ, MAURICIO H.	12781 MIRAMAR PKWY., SUITE 203	<input checked="" type="checkbox"/> Add
		MIRAMAR, FL 33027	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

None

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.

2021

November 03, 2021
 Signature of a member or authorized representative of a member

NORIEGA FLOREZ, MAURICIO H.

Typed or printed name of signee

Filing Fee: \$25.00