Floridar Department of State

Unision of Corporations

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To:

Division of Corporations

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From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062

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Phone Fax Number

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

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Corporate Filing Menu

Help

TO:

Registration Section

COVER LETTER

Div	ision of Corp	porations		
	PANNON I	NVESTMENT ADVISORS LI	LC .	
\$UBJECT:		Name of Limit	ed Liability Company	
The enclosed	d Anicles of .	Amendment and fee(s) are subn	nitted for filing.	
Please return	ı all correspo	ndence concerning this matter t	o the following:	
		Cheyenne Moseley		TALL
			Name of Person	
		Legalzoom.com, Inc.		2002 2003 2003
			Firm/Company	mo.
		101 N Brand Blvd 11th Fi		CRETARY OF TORIDA
			Address	
		Glendale, CA 91203		,
			City/State and Zip Code	
		duvarga@punnonco.com		
		E-mail address: (1	o be used for future unnual report not	tication)
For further i	information c	oncerning this matter, please ca	ill:	
Cheyenne N	Moseley		800 773-0888 at ()	
	Name o	f Person	Area Code Daytin	ne Telephone Number
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		he following amount: 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)
	Registi Divisio	ING ADDRESS: ration Section on of Corporations	STREET/COUR Registration Section Division of Corpo Clifton Building	On
		ON 6327	2661 Executive C	enter Circle

Tallahassee, FL 32301

*Page: 4 of 6

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compa (A Florida Limited I	iny as it now appears on our records.) Cubility Company)		
The Articles of Organization for this Limited Liability Company Florida document number L20000274767	were filed on 09/03/2020 and assigne		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company here:		
The new name must be distinguishable and contain the words "Limited Liahi	ility Company," the designation "LLC" or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:	780 NE 69th ST.		
(Principal office uddress MUST BE A STREET ADDRESS)	Apt. #1701		
Principal office address MOST BE A STREET ADDRESS	Miami, FL 33138		
E	780 NE 69th ST. Apt. #1701		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)	Miami, FL 33138		
B. If amending the registered agent and/or registered of	office address on our records, <u>enter the name of t</u> re:		
Name of New Registered Agent:			
	Enter Florida street address		
Name of New Registered Agent:	Florida		
Name of New Registered Agent:	Enter Florida street address, Florida City Zip Code		

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.

11 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:

2021-06-16 14:18:26 PDT

MGR = Manager AMBR = Authorized Member

To: 18506176383

<u>Title</u>	<u>Name</u> Varga, DUSAN	<u>Address</u>	Type of Action
AMBR			
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		780 NE 69th ST., Apt. #1701 Miami, FL 33138	
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the record) The 90t	l specifies a delayed ef th day after the record	ffective date, but not is filed.	an effective time, a	it 12:01 a.m. on th	ne earlier of:
	00/14	2021			
Dated	06/14	,			

From: Janet Kc

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Typed or printed name of signee

Filing Fee: \$25.00