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(Document Number)	
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## **COVER LETTER**

Registration Section

TO:

Division of Cor	porations		
	BROKERS, LLC		
SUBJECT:	Name of Lin	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	DON PINGARO		
		Name of Person	© \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	SOCIETY BROKERS, LI	.C	
	•	Firm/Company	<del></del>
	10837 GARDEN RIDGE	COURT	
		Address	
	DAVIE, FLORIDA 3332	8	
		City/State and Zip Code	
	donnie.pingaro@sideinc.co E-mail address: (	m to be used for future annual report no	tification)
For further information c	oncerning this matter, please c		
Don Pingaro		305 389-2922	
Name e	f Person	Area Code Daytii	me Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy
Mailing Addres Registration		<u>Street Address:</u> Registration Sc	ection
Division of C		Division of Co	orporations
P.O. Box 632		The Centre of	
Tallahassee.	ht. 52314	2415 N. Monro	oc Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SOCIETY BROKERS, 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  $\frac{9/25/2020}{}$ and assigned 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 "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: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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.

New Registered Agent's Signature, if changing Registered Agent:

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	DON PINGARO	10837 GARDEN RIDGE COURT	□ Add
		DAVIE, FLORIDA 33328	■Remove
			□Change
AMBR	JACOB LYMAN	10837 GARDEN RIDGE COURT	□Add
		DAVIE, FLORIDA 33328	■Remove
		<del></del>	□Change
MGR	DON PINGARO	10837 GARDEN RIDGE COURT	Add
		DAVIE. FLORIDA 33328	□Remove
			□Change
			□Add
			□Remove
			Change
			□Remove
			□Change
	<del></del>		□Add
			□Remove
			□Change

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<b>Sective date, if other than the da</b> n effective date is listed, the date must be stee. If the date inserted in this block cument's effective date on the Department.	cdoes not meet the appli	cable statutory filing re	(optional) than 90 days after filing.) Pro- equirements, this date will	rsuant to 605,020 Fnot be listed as
reord specifies a delayed effective d is filed.	ate, but not an effective	time, at 12:01 a.m. on t	he earlier of: (b) The 90	Oth day after the
December 29 ted	. 2021	·		
	gato gnature of a member or aut			
		pariso I conceentative of	emember	