L2000313114

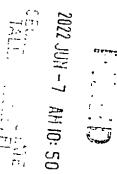
(Re	equestor's Name)	
(Ād	dress)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	∋ #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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LLAHASSEE, FLORE

RECEIVED

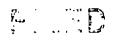
6 re/8/2022

CAPITAL CÓNNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

PAMPOU LLC				
			:	
				Amarilan Pila
				Art of Inc. File
				LTD Partnership File
				Foreign Corp. File
				L.C. File
				Fictitious Name File
				Trade/Service Mark
			 -	Merger File
				Art, of Amend, File
			<u> </u>	RA Resignation
			<u> </u>	Dissolution / Withdrawal
				Annual Report / Reinstatement
			<u> </u>	Cert. Copy
				Photo Copy
				Certificate of Good Standing
				Certificate of Status
				Certificate of Fictitious Name
				Corp Record Search
				Officer Search
				Fictitious Search
Signature				Fictitious Owner Search
				Vehicle Search
	- 			Driving Record
Requested by: SETH	06/07			UCC 1 or 3 File
	06/07	Time		UCC 11 Search
Name	Date	Time		UCC 11 Retrieval
Walk-In	Will Pick Up			Courier

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



PAMPOU LLC

2022 JUN -7 AM 10: 50

(Name of the Limited (A	iny as it now appea Liability Company)	rs on our records.)	TALL.			
The Articles of Organization for this Limited Liab Florida document number L20000313114	oility Company	were filed on 10	0/13/2020	and a	ssigned	
This amendment is submitted to amend the follow	ving:					
A. If amending name, enter the new name of t	he limited liab	ility company h	ere:			
The new name must be distinguishable and contain the wor	ds "Limited Liabii	lity Company," the c	lesignation "LLC" or	the abbreviation "l	lc."	
Enter new principal offices address, if applicab	ole:	255 ARAGON AVENUE, 2ND FLOOR				
(Principal office address MUST BE A STREET ADDRESS)		CORAL GABLES FL, 33134				
Enter new mailing address, if applicable:		255 ARAGON	AVENUE, 2ND FL	.OOR		
(Mailing address MAY BE A POST OFFICE BOX)		CORAL GABLES FL, 33134				
B. If amending the registered agent and/or reg agent and/or the new registered office address Name of New Registered Agent:	istered office : <u>here</u> : ABITOS PLLO		ecords, <u>enter the</u>	name of the ne	<u>w registered</u>	
New Registered Office Address:	255 ARAGON AVENUE, 2ND FLOOR					
New Neglatered Office Address.	Enter Florida street address					
	CORAL GABLES		, Florid	Florida 33134		
New Registered Agent's Signature, if changing Re	zistered Agent:	City		Zip Code		
I hereby accept the appointment as registered of provisions of all statutes relative to the proper accept the obligations of my position as registed being filed to merely reflect a change in the region company has been notified in writing of this ch	and complete red agent as p gistered office	performance of provided for in C	my duties, and I Thapter 605, F.S. by confirm that th	am familiar wa Or, if this doc	ith and ument is	

If Changing Registered Agent, Signature of New Registered Agent

tf 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>	Type of Action	
MGR SOBRERO. DAVID GABRIEL		255 ARAGON AVENUE, 2ND FLOOR		
		CORAL GABLES FL, 33134		
			■ Change	
			TRemove	
			□Clunge	
			□Add	
		ZRemove		
			IChange	
				
		····	Remove	
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Effective date, if other than t (If an effective date is listed, the date is	he date of filing	g:		(optic	onal)	
(If an effective date is listed, the date r Note: If the date inserted in this	nust be specific and	l cannot be prior to	date of filing or mo	re than 90 days after	tiling.) Pursuant to 60	5.0207 (3 g tod as the
document's effective date on the					date will not be its	icu av inc
he record specifies a delayed effec	rive date, but not	an effective tim	e, at 12,01 a,m (o	n the earlier of: (b) The 90th day afte	er the
ord is filed.					•	
Dated		2022				
	654					
	7					
	Signature of a	member or authori	zed representative c	it a member		

Typed or printed name of signee