120000385896

(Requesto	r's Name)
(Address)	
(Address)	
(City/State	e/Zip/Phone #)
PICK-UP	WAIT MAIL
(Business	Entity Name)
(Documen	t Number)
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COVER LETTER

FO: Registration Sec Division of Corp			
SUBJECT:	itons Capi	tal,LLC	·
	Name of Limited	d Liability Company	
ver 1 h A alislam of t	Amendment and fec(s) are submi	itted for filing	
Please return all correspon	ndence concerning this matter to	the following:	
	Bran	Name of Person	
		Name of Person	
		Firm/Company	
	16695 Parker	river St Address	
		FL 33598 City/State and Zip Code US Cafital. Com be used for future annual report notific	
	F-mail address: (to	ns Capital. Com be used for future annual report notific	cation)
For further information of	concerning this matter, please cal	II:	
Brando		at (813) 377-1	7005 Telephone Number
Enclosed is a check for			□ \$60.00 Filing Fee.
□ \$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 (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 ORGANIZATION OF

Pitons (ap	ital, ILC	
(Name of the Limited Liability (A Florida	y Company as it now appears on our records.) Limited Liability Company)	
The Articles of Organization for this Limited Liability Co	ompany were filed on $1210/20$	and assigned
Florida document number <u>L2000038589</u> 6		
This amendment is submitted to amend the following:		LED H # Séelf
A. If amending name, enter the new name of the limite	ed liability company here:	
		255 14
The new name must be distinguishable and contain the words "Limite	ed Liability Company," the designation "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRE	(2.23	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
	-	
B. If amending the registered agent and/or registered o	office address on our records, enter the name	of the new registered
agent and/or the new registered office address here:		
Name of New Projectored Assess		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	·····
No. D. Co. A. Co.	City	Zip Code
New Registered Agent's Signature, if changing Registered A	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>	Address	Type of Action
MGR	Green Company Holdings, LCC	19046 Bruce B Downs Blad 1442	_ 🗆 🗅 Add
		Tampa, FL 33647	_ ERemove
			_ □Change
MGR	Green Company Holdings, LLC	2424 W Brandon Blud #1360) LAdd
		Brandon, FL 33511	_ □Remove
			Change
			_ 🗆 Add
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ffective date, if other than the date of filing: (option an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after file.	ling.) Pursuant to 60	
lote: If the date inserted in this block does not meet the applicable statutory filing requirements, this cocument's effective date on the Department of State's records.	iate will not be iis	ted a
record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) lis filed.	The 90th day after	er the
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ated $\frac{5019}{3}$.		jUL ā
	41838E	:
Signature of a member or authorized representative of a member	1	2022 JUL 11 AM - 14
Brandon Green Typed or printed name of signee	FLORI	40
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