## LZ1000038404

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Certified Copies	Certificat	es of Status
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Special Instructions to F	Hing Officer:	
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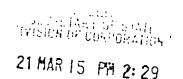
21 HAR 15 PA 2:

## COVER LETTER

TO: Registration Section Division of Corporations				
PINI LLC				
SUBJECT:Name of Limited Liability Company				
The enclosed Articles of	Amendment and fee(s) are sub-	omitted for filing.		
	ondence concerning this matter			
	GUSTAVO J MORA, ME	3A		
	-	Name of Person		
	GM TAX GROUP, INC			
		Firm/Company		
	5378 W 12 AVE			
		Address		
	HIALEAH, FL 33012			
		City/State and Zip Code	<u> </u>	
	INFO@GMTAXGROUP.C			
For further information of	E-mail address: ( concerning this matter, please c	to be used for future annual report not	ilication)	
GUSTAVO J MORA, MBA		305 914-2240 at () Area Code Daytin		
Name o	f Person	Area Code Daytin	ne Telephone Number	
Enclosed is a check for the	he following amount:			
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is melosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Address Registration 5		<u>Street Address:</u> Registration Se	ection	
Division of Corporations		Division of Corporations		
P.O. Box 6327			The Centre of Tallahassee	
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**



PINELLC

(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  $\frac{01/19/2021}{1}$ Florida document number <u>L2</u>1000038404 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 comain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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:

## 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 mercly reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Cirr

Enter Florida street address

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person heing added d address of conor removed from our records:

MGR = Manager AMBR = Authorized Member

21 MAR 15 PA 2: 29

Title	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	VALDES, YULIE D	7825 NW 107TH AVE APT 817	
		DORAL, FL 33178	
			□Change
			□Add
			□Remove
	<del></del>		
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		□Remove	
		□Add	
		Remove	
		□Change	
		□Add	
		Remove	
		□Change	
			□Remove
		□Change	

D. If amending any other information	n, enter change(s) here: (Attach additional sheets, if necessary.)
D. If amending any other information	21 MAR 15 PH 2: 29
<del></del>	
-	
	02/17/2021
E. Effective date, if other than the date (If an effective date is listed, the date must be Note: If the date inserted in this block document's effective date on the Depart	specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(to does not meet the applicable statutory filing requirements, this date will not be listed as the
If the record specifies a delayed effective da record is filed.	ate, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated FABRUARY 17	2021
	muture of a member or authorized representative of a member
MARIA C GUERRA	nature of a member of authorized representative of a member
MARIA C GOCKIM	Typed or printed name of signee