K21000038404

(Re	questor's Name)	
(Ad	dress)	
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(Cit	ry/State/Zip/Phone	; #)
PICK-UP	☐ WAIT	MAIL
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(Document Number)		
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FLORIDA DEPARTMENT OF STATE Division of Corporations

August 7, 2021

YULIE VALDES ARROYABE 1847B NW 20TH ST MIAMI, FL 33142

SUBJECT: PINI LLC

Ref. Number: L21000038404

We have received your document for PINI LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Your document is being returned as requested.

To receive a refund, please submit a written request to the attention of the undersigned. Be sure to include the name of the person or entity the check should be made payable to and the address to which it should be mailed.

If you have any questions concerning the filing of your document, please call (850) 245-6842.

Deborah Bruce Corporate Records Supervisor II

Letter Number: 421A0001873

COVER LETTER

TO: Registration So Division of Co				
PINITLEC SUBJECT:				
30bit.e1.	Name of Lim	nited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspond	ondence concerning this matter	to the following:		
•	Yulie Valdes Arroyabe			
		Name of Person		
	PINLLLC			
		Firm/Company	·	
	1847B NW 20th Street			
		Address		
	Miami, FL 33142			
		City/State and Zip Code		
	julieht07@hotmail.com	to be used for future annual report notifica	tion)	
For further information of	concerning this matter, please c	•		
Yulie Valdes		at (954) 937 - 2	TALLA AUG 30	
Name o	of Person		elephone Number &	ž
Enclosed is a check for the	he following amount:		9:0	•
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)	
<u>Mailing Addres</u> Registration :		Street Address: Registration Section	on	

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations
The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ted Liability Compa (A Florida Limited	nny as it now appears on our records.) Liability Company)			
iability Company	were filed on 01/19/2021	a	and assi	gned
owing:				
f the limited liah	oility company here:			
vords "Limited Liabi	lity Company," the designation "LLC" or	the abbrevia	tien "L.L	.C."
	1847B NW 20th Street, Miami, FL	33142		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		33142		
	address on our records, enter the	name of t	2	registere
Walter Infante			JG 30	том - 10м - 10м - 4
8300 NW 53rd	Street Suite 350	(i)	≥	* \$
Domi	Enter Florida street address	:05.		البيد
DOM:	, Florid	a 33100.		
	Jowing: Joy the limited liable words "Limited Liable cable: ET ADDRESS) BOX) registered office as here: Walter Infante	words "Limited Liability Company," the designation "LLC" or cable: ET ADDRESS) 1847B NW 20th Street, Miami, FL registered office address on our records, enter the ss here: Walter Infante 8300 NW 53rd Street Suite 350 Enter Florida street address Doral Florid	Jowing: The limited liability company here: Words "Limited Liability Company." the designation "LLC" or the abbrevia cable: ET ADDRESS) 1847B NW 20th Street, Miami, FL 33142 BOX) 1847B NW 20th Street, Miami, FL 33142 registered office address on our records, enter the name off: ss here: Walter Infante 8300 NW 53rd Street Suite 350 Enter Florida street address Doral Florida 33166.	and assignation (2017)

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

DIMILLA

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
AMBR	Guerra, Carlos	7825 NW 107 AVE STE 817 DORAL, FL 33178	□Add
			■Remove
			Change
MGR	Guerra, Maria C	7825 NW 107 AVE STE 817 DORAL, FL 33178	□Add
			Remove
			□Change
AMBR	Guerra, Maria C	1847B NW 20th Street, Miami, FL 33142.	= Add
			□Remove
			Change
AMBR	Valdes, Yulie D	1847B NW 20th Street, Miami, FL 33142.	2021DAdd
		(Change of address)	ည် Remove
			Change
		<u> </u>	<u>□</u> □Add
			□Remove
			□ Change
			🗆 Add
			□Remove
			□ Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) N/A E. Effective date, if other than the date of filing:

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed. Dated May 10 2021 Signature of a member or authorized representative of a member Yulie D Valdes Typed or printed name of signee