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(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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T. MATTHEWS
DEC 16 2021

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COVER LETTER

TO:	Registration Se Division of Cor			
		STMENTS, LLC		1
SUBJI	ECT:	Name of Lim	ited Liability Company	
The en	closed Articles of .	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
		JODI RONEN		
			Name of Person	
		JG CONSULTING SERVI	CES, LLC	
			Firm/Company	
		5481 WILES RD STE 502		
			Address	
		COCONUT CREEK, FL 3	3073	
		JODI@ACCU-TAX.TAX	City/State and Zip Code	
		E-mail address: (to be used for future annual report noti	fication)
For fur	ther information co	oncerning this matter, please ca	all:	
JODE	RONEN		954 449-9709	
	Name o	f Person	Area Code Daytim	e Telephone Number
Enclos	ed is a check for th	ne following amount:		
€ 92	5,00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of States	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Addres Registration S Division of C P.O. Box 632 Tallahassee, I	Section Torporations 7	Street Address: Registration Se Division of Cor The Centre of T 2415 N. Monro Tallahassee, FL	porations Tallahassee e Street, Suite 810

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION 1 11 **OF**

PBO INVESTMENTS, 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 01/21/2021	and assigned
Florida document number 1.21000042105		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LI,	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	301 YAMATO RD	
(Principal office address MUST BE A STREET ADDRESS) STE 3198	STE 3198	
	BOCA RATON, FL 33431	
Enter new mailing address, if applicable:	301 YAMATO RD	
(Mailing address MAY BE A POST OFFICE BOX)	STE 319	
	BOCA RATON, FL 33431	
B. It amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>ente</u>	r the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addre	as .
	, F	loridaZip Code
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		

Thereby 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 amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = M $AMBR = A$	anager uthorized Member	Address 21 DEC -6 PN 3: 35	
Title	<u>Name</u>	Address 21 DEC -6 PH 3: 35	Type of Action
MGR	DANIEL HASON	309 S LAKESIDE DR	JAdd
		LAKE WORTH, F1, 33460	Remove
			□Change
			
			□□□□□Remove
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f amending any other information	on, enter change(s) here: /.	Attach additional sheets, if necessary.)
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Tective date, if other than the data an effective date is listed, the date must be offer. If the date inserted in this block becament's effective date on the Department's	e specific and cannot be prior to da k does not meet the applicable	(optional) te of filing or more than 90 days after filing.) Pursuant to 605.02 statutory filing requirements, this date will not be listed
ecord specifies a delayed effective d is filed.	ate, but not an effective time, a	nt 12:01 a.m. on the earlier of: (b) The 90th day after the
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12/ 02 /	2021	
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# ★	gnature of a member or authorized	representative of a member