

h21000137398

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

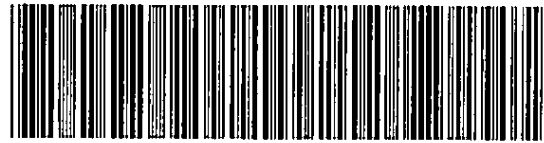
(Business Entity Name)

(Document Number)

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2021 SEP -1 PM 10:16

CLERK OF SUPERIOR COURT

D. BRUCE  
SEP 12 2021

# COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Pelegio LLC  
\_\_\_\_\_  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Nicole J. Huesmann, Esquire  
\_\_\_\_\_  
Name of Person  
  
Nicole J. Huesmann, P.A.  
\_\_\_\_\_  
Firm/Company  
  
150 Alhambra Circle, Suite 1150  
\_\_\_\_\_  
Address  
  
Coral Gables, FL 33134  
\_\_\_\_\_  
City/State and Zip Code  
  
njhuesmann@njhlaw.com  
\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Nicole Huesmann  
\_\_\_\_\_  
Name of Person  
  
305 858 0220  
at ( ) \_\_\_\_\_  
Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- \$25.00 Filing Fee       \$30.00 Filing Fee & Certificate of Status       \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)       \$60.00 Filing Fee, 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

FILED  
2021 SEP -1 PM 4:55  
TALLAHASSEE, FL

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

Pelegio 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 March 24, 2021 and assigned Florida document number L21000137398.

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 contain the words "Limited Liability Company," the designation "L.L.C." or the abbreviation "L.L.C."

**Enter new principal offices address, if applicable:**

16849 Pierre Circle

**(Principal office address MUST BE A STREET ADDRESS)**

Delray Beach, FL 33446

**Enter new mailing address, if applicable:**

16849 Pierre Circle

**(Mailing address MAY BE A POST OFFICE BOX)**

Delray Beach, FL 33446

**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: \_\_\_\_\_

*Enter Florida street address*

\_\_\_\_\_, Florida

City

Zip Code

**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 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>	<u>Address</u>	<u>Type of Action</u>
MGR	Helmut Herzog	16849 Pierre Circle	<input type="checkbox"/> Add
		Delray Beach, FL 33446	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	Steffen Brandt	2211 Imperial Point Drive	<input type="checkbox"/> Add
		Fort Lauderdale, FL 33308	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	Dr. Nana Peleg	16849 Pierre Circle	<input type="checkbox"/> Add
		Delray Beach, FL 33446	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

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