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SECRETARY OF STATE

COVER LETTER

Registration Section

TO:

	porations		
Pantheon F	inancial Management, LLC		
SUBJECT:	Name of Lim	ited Liability Company	-
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	SECRE TALL
Please return all correspo	ondence concerning this matter	to the following:	AR H
	Craig W. Young, Esq.		CRETARY OF S
Name of Person		77.7	
	CWY Legal & Consulting	. Inc.	r d
		Firm/Company	
	2500 Quantum Lakes Driv	e, Ste 100	
		Address	
	Boynton Beach, FL 33426		
		City/State and Zip Code	
	craig@cwylegal.com		-
	E-mail address: (to be used for future annual report notif	fication)
For further information of	concerning this matter, please c	all:	
Craig Young		561 568-1000 at ()	
Name o	of Person	Area Code Daytime	e Telephone Number
Enclosed is a check for t	he 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 Division of C P.O. Box 633 Tallahassee,	Section Corporations 27	Street Address: Registration Sec Division of Cor The Centre of T 2415 N. Monro Tallahassee, FL	porations Callahassee e Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Pantheon Financial Management, 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 ______05/11/2021 Florida document number _______1_21000219336 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 "LLC" or the abbre 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: Enter Florida street address City 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>	Address	Type of Action
MGR	Chris Pordon	2260 North Dixie Highway	🗀 Add
		Boca Raton, FL 33431	≅ Remove
			Change
MGR	Hayder Hassan	2260 North Dixie Highway	□Add
		Boca Raton, FL 33431	■ Remove
			☐Change
MGR	Lawrence Davis	2500 Quantum Lakes Drive	
		Ste 100	⊘_ _ □ ZSS move
		Boynton Beach, FL 33426	ZZ AUGange 3000
MGR	Sam Escobar	2500 Quantum Lakes Drive	HASSO IN
<u> </u>		Ste 100	Mor so Ove
		Boynton Beach, FL 33426	— ≣Change
MGR	Dania Carballo	2500 Quantum Lakes Drive	
		Ste 100	□Remove
		Boynton Beach, FL 33426	= Change
MGR	Rene Brillemburg	2500 Quantum Lakes Drive	
		Ste 100	Remove
		Boynton Beach, FL 33426	□Change

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Effec	tive date, if other than the date of filing:(optional)		
lf an e	ffective 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
Note docu	If the date inserted in this block does not meet the applicable statutory filing requirements, this date nent's effective date on the Department of State's records.	will not be	nsicu as
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	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) Th	، برواء Auth طور	after the
rd is		c zoni day i	arter tire
Date	August 2 2022		
Date			

Filing Fee: \$25.00

Typed or printed name of signee