

h21 000228836

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

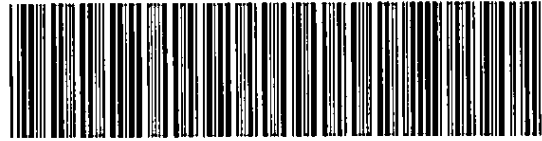
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2021 AUG 20 PM 3:07
SECRETARY OF STATE
TALLAHASSEE, FL

[Handwritten signature]



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 19, 2021

HECTOR HUGO PINEDA GOMEZ
8942 SW 227TH TERRACE
CUTLER BAY, FL 33190

SUBJECT: P.H. INVESTMENT SERVICES LLC
Ref. Number: L21000228836

We have received your document for P.H. INVESTMENT SERVICES 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):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Yvette Scott
Document Specialist II

Letter Number: 121A00016542

COVER LETTER

TO: Registration Section
Division of Corporations

RECEIVED

2021 AUG 19 PM 3:49

SUBJECT: P.H. INVESTMENT SERVICES 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:

HECTOR HUGO PINEDA GOMEZ

Name of Person

P.H. INVESTMENT SERVICES LLC

Firm/Company

8942 SW 227TH TERRACE

Address

CUTLER BAY FL 33190

City/State and Zip Code

gatprofessional@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

HECTOR HUGO PINEDA GOMEZ

786 3700181

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

SECRETARY OF STATE
TALLAHASSEE, FL

2021 AUG 20 PM 3:07

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

P.H. INVESTMENT SERVICES 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 05/17/2021 and assigned
Florida document number L21000228836

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

P.H. INVESTMENT SERVICES LLC

The new name must be distinguishable and contain 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)

8942 SW 227TH TERRACE

CUTLER BAY FL 33190

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

8942 SW 227TH TERRACE

CUTLER BAY FL 33190

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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:

CARLOS A NUNEZ

New Registered Office Address:

8942 SW 227TH TERRACE

Enter Florida street address

CUTLER BAY FL

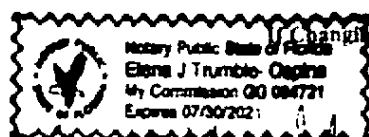
Florida 33190

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.



Elena J. Trumble - Ocala

[Signature]

Changing Registered Agent, Signature of New Registered Agent

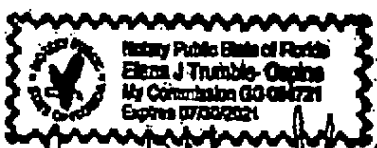
If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	HECTOR HUGO PINEDA GOMEZ	8942 SW 227TH TERRACE	<input type="checkbox"/> Add
		CUTLER BAY FL 33190	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	PABLO PINEDA GONZALEZ	8942 SW 227TH TERRACE	<input type="checkbox"/> Add
		CUTLER BAY FL 33190	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

THIS AMENDMENT IS PRESENTED BY CORRECTION IN THE FULL NAMES OF THE MEMBERS IN
IN THE POSITION WITHIN THE LLC.

THE CHANGE IS :

"P" AND "VP" BY AMBR IN BOTH MEMBERS

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TALLAHASSEE, FL

E. Effective date, if other than the date of filing: 05/17/2021 (optional)

(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 28 2021

Signature of a member or authorized representative of a member

HECTOR HUGO PINEDA GOMEZ - AMBR 05/28/2021

Typed or printed name of filer

Notary Public State of Florida
Elaine J. Thumbe - Online
My Commission 00084721
Expires 07/30/2021

Elaine J. Thumbe - Online