L21000379835

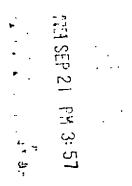
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



600373639386

09/21/21--01029--002 **25.00





COVER LETTER

TO:

Registration Section

sion of Cor	porations				
Name of Limited Liability Company					
Articles of	Amendment and fee(s) are sub	mitted for filing.			
all correspo	ndence concerning this matter	to the following:			
	JORGE L DIAZ				
		Name of Person			
	PM PROPERTIS-1 LLC				
		Firm/Company			
	8113 NW 33rd ST				
		Address			
	DORAL, L 33122				
Name of Limited Liability Company sed Articles of Amendment and fee(s) are submitted for filing. Im all correspondence concerning this matter to the following: JORGE L DIAZ					
		to be used for future enqual report no	tification)		
formation c		•	uncation		
ΛZ					
Name o	f Person		ne Telephone Number		
check for th	ne following amount:				
ling Fee	-	Certified Copy	Certificate of Status &		
	_	<u> </u>	ection		
sion of C	orporations	Division of Co	Division of Corporations		
			Tallahassee oe Street, Suite 810		
	Articles of all corresponding Address istration Sion of C Box 632	PM PTOPERTIES-1 LLC Name of Lim Articles of Amendment and fee(s) are subset of the following amount: Ing Fee S30.00 Filing Fee & Certificate of Status Ing Address: Istration Section sion of Corporations	PM PTOPERTIES-1 LLC Name of Limited Liability Company Articles of Amendment and fee(s) are submitted for filing. all correspondence concerning this matter to the following: JORGE L DIAZ Name of Person PM PROPERTIS-1 LLC Firm/Company 8113 NW 33rd ST Address DORAL, L 33122 City/State and Zip Code jldiazq@gmail.com E-mail address: (to be used for future annual report no formation concerning this matter, please call: AZ Name of Person Area Code Dayting check for the following amount: ling Fee Certificate of Status Certified Copy (additional copy is enclosed) ing Address: stration Section Sion of Corporations Division of Co- Box 6327 The Centre of		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PM PROPERTIES-1 LLC	
(Name of the Limited Liability Company as it now a (A Florida Limited Liability Compa	ppears on our records.) any)
The Articles of Organization for this Limited Liability Company were filed of Florida document number L-21000379835	n 08/24/2021 and assigned
his amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability compar	ny here:
he new name must be distinguishable and contain the words "Limited Liability Company,"	the designation "LLC" or the abbreviation "L.L.C."
Inter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDRESS)	
	E E
	12
Inter new mailing address, if applicable:	PH .
Mailing address MAY BE A POST OFFICE BOX)	<u>ب</u>
	<u> </u>
 -	
3. If amending the registered agent and/or registered office address on o gent and/or the new registered office address here:	ur records, enter the name of the new regist
gent and/or the new registered office address nere:	
Name of New Registered Agent:	
New Registered Office Address:	
Ente	r 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>	Address	Type of Action
MGR	MARY L PUMAREJO	11495 NW 71 ST, DORAL, FL 33178	□Add
			\ Remove
			□Change
MGR	MARY L MEJIA DE PUMAREJO	11283 NW 65 ST, DORAL, FL 33178	= Add
			P2 ——□Add
			(In Remove
			Change
			□Add
		<u> </u>	□Remove
		<u> </u>	□ Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□ Change

				· · · · · · · · · · · · · · · · · · ·
	•			
				
				<u> </u>
	_		. ط	S
				<u> </u>
			- 0.5	
			100 A	7
				.
		<u> </u>	· · ·	 -
petive date if other than the date of filing.			(ontional)	
ective date, if other than the date of filing: effective date is listed, the date must be specific and cannot be p	rior to date of filir	ng or more than 90 da	(optional) nys after filing.)	Pursuant to 605.020
e: If the date inserted in this block does not meet the appument's effective date on the Department of State's record		y filing requireme	nts, this date w	all not be listed a
cord specifies a delayed effective date, but not an effective	e time, at 12:01	a.m. on the earlie	r of: (b) The	90th day after the
s filed.				
ed Sept 20 , 2021				
	1			
		<u> </u>		
Signature of a member or a		ative of a member	•	