

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

L21000419220

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H23000419721 3)))



H23000419721 3 ABCS

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : PAGIO'S & ASSOCIATES, LLC
Account Number : I20100000043
Phone : (305)397-8553
Fax Number : (305)397-8521

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address:

info@pagios.net

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
PAGIO'S & ASSOCIATES II, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

Dec. 6. 2023 2:00PM

No. 1329-P. 2
H230004197213

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PAGIO'S & ASSOCIATES II, 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:

MARIEL G. GUERRA

Name of Person

PAGIO'S & ASSOCIATES II, LLC

Firm/Company

17100 COLLINS AVE, STE. 209

Address

SUNNY ISLES BEACH, FL 33160

City/State and Zip Code

INFO@PAGIOS.NET

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

For further information concerning this matter, please call:

MARIEL G. GUERRA

at (305) 397-8553

Name of Person

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

Dec. 8. 2023 2:00PM

H230004197213 No. 1329 P. 3

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

PAGIO'S & ASSOCIATES II, 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 09/23/2021 and assigned
Florida document number L21000419220.

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 abbreviation "L.L.C."

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, Florida 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

Dec. 9, 2023 2:00PM

H23000-1972-13 No. 1329 P. 4

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	CURIEL, PAOLA L	1040 71ST STREET, STE 103	<input type="checkbox"/> Add
		MIAMI BEACH, FL 33141	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	GUERRA, PAOLA L.	1040 71ST STREET, STE 103	<input checked="" type="checkbox"/> Add
		MIAMI BEACH, FL 33141	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

Dec. .3. 2023 2:00PM

H23000-4197215

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

[illegible]

E. Effective date, if other than the date of filing: DECEMBER 07, 2023 (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 _____, DECEMBER 07, 2023

Signature of a member or authorized representative of a member

PAOLA L. GUERRA

Typed or printed name of signee

Filing Fee: \$25.00