Florida Department of State

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(((H23000118896 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ELLISON LAZENBY PLLC

Account Number : I20150000059 Phone : (727)362-6151 Fax Number : (727)362-6131

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

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN PCPRE GROUP 24, LLC

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03/29/2023 3:00 PM

ARTICLES OF AMENDMENT

H23000118896 3 ARTICLES OF ORGANIZATION

PCPRE GROUP 24, LLC				
(Name of the Limited Liability Comp (A Florida Limited	any as it now appears on our (Liability Company)	records.)		
The Articles of Organization for this Limited Liability Company Florida document number L22000059346	y were filed on 02/03/2022		and ass	igned
This amendment is submitted to amend the following:				
A. If amending name, <u>enter the new name of the limited lial</u>	bility company here:			
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation	"LLC" or the ab	breviation "L.1	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 agent and/or the new registered office address here:	address on our records, g	enter the nam	e of the new	register
Name of New Registered Agent:	····		2023	
New Registered Office Address:		<u>.</u> :	MÁR	
	Enter Florida street	address -	9	
	Cny	Florida	Zip Code	
New Registered Agent's Signature, if changing Registered Agent	<u>:</u>		- ယ - ယ	
thereby and the supplication of an agricultural and agricultural	and to motion this property	. 1 6	N	المنادات

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

From: William Lazenby Fax: 17273626151 To. Fax: (850) 617-6383 Page: 3 of 4 03/29/2023 3:00 PM

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 H230001188963

<u>Title</u>	<u>Name</u>	Address	Type of Action
			🗆 Add
			□ Remove
			Change
MGR	Prosperity Capital Partners LLC	12945 SEMINOLE BLVD., BLD. 1 SUITE 15	□Add
		LARGO. FL 33778	■ Remove
			□Change
MGR	PCPRE MANAGEMENT, LLC	12945 SEMINOLE BLVD., BLD. 1 SUITE 15	• Add
		LARGO, FL 33778	□Remove
			□ Change
			🗆 ∧dd
			□Remove
			Change
			🗆 Add
			□ Remove
			□Change
			□ Add
			□ Remove
			□Change

To:

Page: 4 of 4

). If amendi	ing any other infor	mation, enter (change(s) here:	(Attach additio	nal sheets, if nec	essary.)	
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the record specord is filed.	occifies a delayed effe	ctive date, but no	ot an effective tim	ne, at 12:01 a.m. c	on the earlier of: (b	o) The 90th day after	er the
Dated Mar	rch 29	_	2023				
		Signature of a	member or author	ized representative	of a member		
	Randal Lawrence						

Typed or printed name of signee