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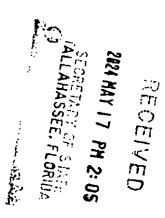
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DATE:

5/17/2024

NAME: PINO BNB LLC

TYPE OF FILING: AMENDMENT

COST:

25.00

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AUTHORIZATION: ABBIE/PAUL HODGE

# **COVER LETTER**

	tegistration Se Division of Cor				
OUD IE CO	PINO BNB	BLLC			
SUBJECT	l:	Name of Lim	ited Liability Company	<del></del>	
The enclos	sed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please retu	ırn all correspo	ondence concerning this matter	to the following:		
		TOMAS A. GONZALEZ	, JR ., ESQ.		
			Name of Person		
		TOMAS GONZALEZ LA	.W. P.A.		
		<del>.</del>	Firm/Company		
		PO BOX 934878			
			Address		
		MARGATE, FLORIDA 3	3093-4878	. <u></u> 	
		<del></del>	City/State and Zip Code		:
		sunbiz@tomasgonzalezlaw			<b>1</b>
For further	r information c	oncerning this matter, please c	to be used for future annual report not all:	meation)	
TOMAS	GONZALEZ		833 288-7878 at ( )		
	Name o	f Person		ie Telephone Number	
Enclosed i	s a check for th	ne following amount:			
■ \$25.00	0 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 enclo	
	<b>lailing Addres</b> Legistration S		<u>Street Address:</u> Registration Se	ection	
Γ	Division of C	Corporations	Division of Co.	rporations	
	P.O. Box 632 Tallahassee, 1		The Centre of 7	Fallahassee be Street, Suite 810	

Tallahassee, FL 32303

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compa (A Florida Limited	iny as it now appears on our r Liability Company)	ecords.)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L22000127868</u> .	were filed on 03/14/2022	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation	"LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	1700 SW 64th Ave		
(Principal office address MUST BE A STREET ADDRESS)	Miami, Fl 33155		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
		- 55 55	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>e</u>	nter the name of the new regis	
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida street a	uddress	
	City	_, Florida Zip Code	

#### New Registered Agent's Signature, if changing Registered Agent:

PINO BNB LLC

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>	Name	Address	Type of Action
AMBR	PINO, DAVID	915 COUNTRY CLUB PRADO	🗆 Add
		MIAMI, FL 33134 UN	Remove
			□ Change
AMBR	LAFARGA, JANET	915 COUNTRY CLUB PRADO	□Add
		MIAMI, FL 33134	≣Remove
	Janet Lafarga, Trustee, Janet		□ Change
MBR	Lafarga Revocable Trust, u/d/t, dated 03/04/21, as amended	1700 SW 64th Ave	■Add
		Miami, Fl 33155	□Remove
			(DChange
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	late inserted in thi fective date on th				statutory 11	ing requiren	ients, this da	ite wi	ill not be listed a
cord specif s filed.	fies a delayed effe	ctive date, but	not an effe	ctive time,	at 12:01 a.n	i, on the ear	ier of: (b)	The 9	90th day after the
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	May 16	)	202	:4					
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ed		Signature o	of a member	or authorize	d representa	ve of a memb	er		