Florida Department of State

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : COHEN, NORRIS, WOLMER, RAY, TELEPMAN & COHEN

Account Number : 120020000140 Phone : (561)844-3600 : (561)842-4104 Fax Number

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

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789 PSL HOLDINGS, LLC

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TOVER LETTER

	gistration Se vision of Cor		<u>.</u>	
01101000	789 PSL HC	OLDINGS, LLC		
SUBJECT:		Name of Limi	ted Liability Company	
The enclose	d Articles of .	Amendment and fee(s) are sub	mitted for filing.	
Please retur	n all correspo	ndence concerning this matter	to the following:	
		BERNARD A. CONKO, E	SQ.	
			Name of Person	
		Cohen Norris Wolmer Ray	Telepman Berkowitz Cohen	
Firm/Company 712 U.S. Highway One, Suite 400 Address		Firm/Company		
		North Palm Beach, FL 334	08	
			City/State and Zip Code	·
		TJ.AFSONE@GMAIL.CO	M so be used for future annual report notific	ation
F &				
ror runner	intormation c	oncerning this matter, please ea		
Karin Drak	25		561 844-3600 at () ——————————————————————————————	
	Name o	f Person	Area Code Daytime 1	Telephone Number
Enclosed is	a check for th	ne following amount:		
云 \$25.00	Filing Fee	S30.00 Filing Fee & Certificate of Status	S\$5.00 Filing Fcc & Certified Copy (additional copy is enclosed)	S60.00 Filing Fcc, Certificate of Status & Certified Copy (additional copy is enclosed)
	ailing Addres		Street Address: Registration Secti	ion

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

LOCUSIGN EXIVERIDAD ID. SOF SOLITOF FOR THE ACCUSED TO AMENDMENT TO ARTICLES OF ORGANIZATION OF

789 PSL HOLDINGS, LLC		
(Name of the Limited Liability Company (A Florida Limited Lia	v as it now appears on our records.) ability Company)	
The Articles of Organization for this Limited Liability Company w Florida document number 122000158029	vere filed on 4/13/2022	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabili	ity company here:	
The new name must be distinguishable and contain the words "Limited Liability	y Company," the designation "LLC" or the abbrevi	ation "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 ac	idress on our records, enter the name of	the new registere
agent and/or the new registered office address here:	;	. ~
Name of New Registered Agent:		022 AI
New Registered Office Address:	Enter Florida street address	ি চ
	Florida , Florida	
New Registered Agent's Signature, if changing Registered Agent:	City	ip C ode
	in the same of the	o comply with the
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as probeing filed to merely reflect a change in the registered office a company has been notified in writing of this change.	performance of my duties, and I am fami rovided for in Chapter 605, F.S. Or, if th	liar with and is document is

If Changing Registered Agent, Signature of New Registered Agent

T-384 P.04/05 F-779

08-02-22 03:50pm From-

or removed from our records:

MGR = Manager AMBR = Authorized Member

Title	Name	Address	Type of Action
MGR	COORDINATES PPE, LLC	1620 N. US HIGHWAY ONE, #1	□Add
		JUPITER, FL 33458	BRemove
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fan effec	e date, if other than the	t be specific at	nd cannot be prior	to date of filin	ig or more than 90	days after filing.) Pursuant to 605.02	267 (
Note: If	the date inserted in this but's effective date on the D	ock does not	meet the applic	cable statutor	y filing requirer	nents, this date	Will not be listed	. 25 1
30C 1111C1	it's circuit and on are	- p - m - m - m - m - m - m - m - m - m	•					
	specifics a delayed effective	e dose but no	ot an affective t	ime at 12:01	am on the éar	lier of: (b) Th	e 90th day after t	he
record rd is filed		e date, out it	or an encouver	ine, at 12.01	uimi on me en			
Dated A	UGUST 2		2022					
میں۔ م	OccuBigned by:		_ ,	 •				
	Tadd Jones							
	-08F283CF3240483 .	Signature of a	a member or auth	orized represe	ntative of a memb	жī		

Filing Fee: \$25.00