L22000170225

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COVER LETTER

INVESTM	ENTS P&J LLC			
SUBJECT:		nited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspo	ndence concerning this matter	to the following:		
	JOSE LUIS GARCIA			
		Name of Person		
	INVESTMENTS P&J LL	c		
		Firm Company		
	1630 W 74TH ST			
		Address	22	-
	HIALEAH, FL 33014		2 SEP	THIS ON OF
	0.4560	City/State and Zip Code	- 6 - G	
	jlorbit@gmail.com E-mail address: (to be used for future annual report notification)		·:
For further information co	oncerning this matter, please c	rall:	PH 3:	CC ACCIONALION
JOSE LUIS GARCIA		786 399-8330	: 58	1101
Name o	f Person	Area Code Daytime Telephone Number		
Enclosed is a check for th	e following amount:			
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)		
Mailing Addres Registration S Division of C P.O. Box 632 Tallahassee, F	Section orporations 7	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street. Suite 810 Tallahassee, FL 32303		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

INVESTMEN	TTS P&J LLC	
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our recor lability Company)	<u>ds.</u>)
The Articles of Organization for this Limited Liability Company Florida document number L22000170225	were filed on APRIL 08, 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 Liabil	ity Company," the designation "LL	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
		2 5
		SEP 10x
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		22 SEP - 6 PM
B. If amending the registered agent and/or registered office a	nddress on our records, <u>ente</u>	(n =
agent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addre	333
	F	lorida
	Cıù.	Zıp Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, a provided for in Chapter 605,	nd I am familiar with and F.S. Or, if this document is

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

Title	<u>Name</u>	Address	Type of Action
AMBR	PEDRO A CARDENAS	1630 W 74TH ST HIALEAH, FL 33014	
			□Change
		W-1-1	
			Remove
			Change
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary	.,
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Effective date, if other than the date of filing: (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.) Note: If the date inserted in this block does not need the applicable statutory filing requirements, this date document's effective date on the Department of State's records.	Pursuant to 605 0207 (3 kb) will not be listed as the
f the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The ecord is filed.	e 90th day after the
Dated SEPTEMBER 02 2022	
Signature of a member or authorized hypresentative of a member	***************************************

Filing Fee: \$25.00