

To:

Page: 2 of 5

2022-09-28 15:08:50 CST

1,122,124,673

From: Lexus Wingo

9/28/22, 5:05 PM

# L22000409276

Division of Corporations

## Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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((H22000335004 3))



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To:

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

From:

Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (954)208-0845  
Fax Number : (614)573-3996

**\*\*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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2022 SEP 29 AM 9:12

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS

SEP 29 2022 9:11:37

### LLC AMND/RESTATE/CORRECT OR M/MG RESIGN PEN2002 OWNER, LLC

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$55.00

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Corporate Filing Menu

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J DENNIS  
SEP 30 2022

DocuSign Envelope ID: F2EC1CE9-F455-4C94-8B3A-1BAAA63F1D43

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

PEN2002 Owner, 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 09/19/2022 and assigned Florida document number L22000409276.

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:

3201 NE 183rd Street, #2002

(Principal office address MUST BE A STREET ADDRESS)

Aventura, FL 33061

Enter new mailing address, if applicable:

3201 NE 183rd Street, #2002

(Mailing address MAY BE A POST OFFICE BOX)

Aventura, FL 33061

**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:

Leslie J. Fivel

New Registered Office Address:

3201 NE 183rd St., #2002

*Enter Florida street address*

Aventura

*City*

Florida 33061

*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.*

DocuSigned by:

Leslie J. Fivel

**II Changing Registered Agent, Signature of New Registered Agent**

Leslie J. Fivel

DocuSign Envelope ID: F2EC1CE9-F455-4C94-8B3A-18AAA63F1D43

**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>
MGR	Leslie J. Fivel	312 W. North Street	<input type="checkbox"/> Add
		Indianapolis, IN, 46202	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	The Private Exchange Group, Inc.	10101 W. Sample Rd.	<input type="checkbox"/> Add
		Coral Springs, FL 33065	<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

