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Division of Corporations





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	Division of Corporations Fax Number : (850)617-6383			2023 /	
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	Account Number : I20000200146 Phone : (305)444-4994				۲Ì
	Fax Number : (305)328-4774				C
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Help

To:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PYEM1 INVESTMENTS LLC

(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)

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 "LLC."

Enter new principal offices address, if applicable:

(Mailing address MAY BE A POST OFFICE BON)

Enter new mailing address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

3825 HERON RIDGE LN

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3825 HERON RIDGE LN	문년 대학	PR
WESTON, FL 33331	· · · · · · · · · · · · · · · · · · ·	8
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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:		
New Registered Office Address:	Enter Florida street addr	JX9
	, F	lorida Zıp 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.

If Chauging Registered Agent, Signature of New Registered Agent

ĩo:

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	Name	Address	Type of Action
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

E. Effective date, if other than the date of filing: _ Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated ______ 2023 _____

Gasid Rodniguez Signalize of a member or authorized representative of a member

YESID RODRIGUEZ

Typed or printed name of signee