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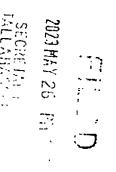
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| Special Instructions to Filing Officer: |
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Office Use Only



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COVER LETTER

| TO: Registration Section Division of Corporation | |
|--|---|
| SUBJECT: | Pavilion Equity LLC Name of Limited Liability Company |
| The enclosed Articles of Art | endment and fee(s) are submitted for filing. |
| Please return all corresponde | ence concerning this matter to the following: |
| | Luis Miguel Sofillo Johnson |
| | Pavilian Company LLC |
| | 1010 Brickell Ave, 2606 |
| | Minn FL #33131 City/State and Zip Code |
| | E-mail address: (to be used for future annual report netification) |
| For further information cond | erning this matter, please call: |
| Luis Nigel Name of Po | Solito John at (S61) 997 - 4960 Area Code Daytime Telephone Number |
| Enclosed is a check for the f | following amount: |
| □ \$25.00 Filing Fee | □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) |

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

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

Pavilion Eavily LLC

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| (Name of the Limited Liabifity Compa (A Florida Limited I | ny as it now appears on our records.) |
|---|--|
| The Articles of Organization for this Limited Liability Company Florida document number <u>L 23000 200 90 6</u> | were filed on $4/24/2023$ 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 "LLC" or the abbreviation "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 a agent and/or the new registered office address here: | address on our records, enter the name of the new registered |
| Name of New Registered Agent: | |
| New Registered Office Address: | |
| | Enter Florida street address |

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.

City

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> | <u>Name</u> | Address | Type of Action |
|--------------|--------------------|--------------------|----------------|
| M6R | Gianpaolo Contatti | 1010 Prichall Ale | □Add |
| | ` | #2606 | (XRemove |
| | | Mian, FL 33131 | □Change |
| MGR | Francia Lopez | Ww Brishell Are | □Add |
| | | #260C | Remove |
| | | Itaniy PL - 33131 | □Change |
| MGR | Enrique Aylagus | 1010 Brikell Ave | □Add |
| | | #2606 | Remove |
| | | 91'nhi, FL - 3313) | □Change |
| | | | □Add |
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| If an effect Note: If | tive date is listed, the three | than the date of the date must be spec- lin this block does ton the Departme | rific and canr s not meet | not be prior to the applicab | date of filing or | more than 9 | | iling.) Pursuant | |
| e record s | | ed effective date, t | out not an e | ffective tim | e, at 12:01 a.n | n, on the ea | arlier of: (b) | The 90th da | y after the |
| Dated | May | 11 ^K | , <u></u> | 2023 | ÷ | | | | |
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| | | Signatu | re of a mem | ber or authori | zed representat | ive of a mer | nber | | |

Filing Fee: \$25.00

COVER LETTER

| TO: Registration Section Division of Corporations |
|---|
| SUBJECT: Pavilion Equity LLC Name of Limited Liability Company |
| The enclosed Articles of Amendment and fee(s) are submitted for filing. |
| Please return all correspondence concerning this matter to the following: |
| Luis Minuel Sotillo Johnson |
| Powition Company LLC |
| - 1010 Bridel Ave. 21,06 |
| Minn FL #33131 |
| City/State and Zip Code City/State and Zip Code City/State and Zip Code E-mail address: (to be used for future annual report notification) |
| For further information concerning this matter, please call: |
| Luis Migral Sohilo Johnwat (S61) 297 - 49 60 Name of Person Name of Person Name of Person Name of Person |
| Enclosed is a check for the following amount: |
| □ \$25.00 Filing Fee Certificate of Status □ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) □ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) |

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

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

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|---|---------------------------------------|----------------|-------------------------|---------------------------------------|--------------|
| (Name of the Limited Liability) (A Florida Liability) | Company as it nov | v appears or | 2023 MAY 26 | $F_{ij} \stackrel{\circ}{=} \cdots$ | |
| The Articles of Organization for this Limited Liability Conference Laboratory Plorida document number Laboratory 40 | nnany were filed | | 124/20 | $\frac{1}{2}$ and as | signed |
| This amendment is submitted to amend the following: | | | | | |
| A. If amending name, enter the new name of the limite | d liability comp | oany here: | | | |
| | | | | • | |
| The new name must be distinguishable and contain the words "Limited | d Liability Compan | y." the design | nation "LLC" or the | abbreviation "L | L.C." |
| Enter new principal offices address, if applicable: | | - | | | |
| (Principal office address MUST BE A STREET ADDRE | çei | | | | |
| · | | | | | |
| Enter new mailing address, if applicable: | | | | | |
| • | - | - | | | |
| (Mailing address MAY BE A POST OFFICE BOX) | | | | | |
| | | | | . | |
| B. If amending the registered agent and/or registered o agent and/or the new registered office address here: | ffice address on | ı our recoi | ds, <u>enter the na</u> | me of the ne | w registerec |
| Name of New Registered Agent: | · · · · · · · · · · · · · · · · · · · | | | | |
| New Registered Office Address: | | | | · | <u></u> _ |
| | Er | nter Florida s | treet address | | |
| · | | | , Florida | | |
| | City | | _ | 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.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title</u>, <u>name</u>, <u>and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

| <u>Title</u> | <u>Name</u> | Address | Type of Action |
|--------------|--------------------|-------------------|----------------|
| MGR | Granpaole Contribi | With British Ale | 🗆 Add |
| | • | #2606 | (XKemove |
| | | Mian, FL 33131 | □Change |
| MGR | Francia Lopez | 1010 Brishell Ave | □Add |
| | | # 26.76 | Remove |
| | | 1-wild 10131 | Conange |
| MGR | Encique Aylanger | 1010 Brikell Ave | 🗆 Add |
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Filing Fee: \$25.00