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## FLORIDA FILING & SEARCH SERVICES, INC.

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155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

11/02/2023

NAME: PANAM ROAD LLC

TYPE OF FILING: AMENDMENT

COST:

25.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE

#### **COVER LETTER**

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Tallahassee, FL 32303

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

(Name of the Limited Liability Company as it (A Florida Limited Liability	now appears on our records.) Company)
The Articles of Organization for this Limited Liability Company were f	led on 09/28/2023 and assigne
Florida document number L23000449777	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability co	mpany here:
x. If afficiently hame, enter the new hame of the number habitity co	
t. If amending name, enter the new name of the minited hability et	
The new name must be distinguishable and contain the words "Limited Liability Con	oany," the designation "LLC" or the abbreviation "L.L.C."
he new name must be distinguishable and contain the words "Limited Liability Con Inter new principal offices address, if applicable:	
he new name must be distinguishable and contain the words "Limited Liability Con Inter new principal offices address, if applicable:	oany," the designation "LLC" or the abbreviation "L.L.C."
he new name must be distinguishable and contain the words "Limited Liability Con Inter new principal offices address, if applicable:	pany," the designation "L.L.C." or the abbreviation "L.L.C."
the new name must be distinguishable and contain the words "Limited Liability Con  Inter new principal offices address, if applicable:  Principal office address MUST BE A STREET ADDRESS)	pany," the designation "L.L.C." or the abbreviation "L.L.C."
The new name must be distinguishable and contain the words "Limited Liability Con 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)	oany," the designation "LLC" or the abbreviation "L.L.C."

B. 1: agent and/or the new registered office address here:

Name of New Registered Agent:		
New Registered Office Address:	Enter Florida stree	t address
	Cin	Florida Zin 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, 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
MGR	JOEL CASTILLO	5262 SW 158TH AVE MIRAMAR FL 33127	<b>=</b> Add
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Effective date, if other than the date an effective date is listed, the date must be Note: If the date inserted in this blocklocument's effective date on the Department.	e specific and cannot be prio	cable statutory filing re	(optional) than 90 days after filing equirements, this date	) Pursuant to 605 will not be list	5.0207 ed as
record specifies a delayed effective d d is filed.	ate, but not an effective t	ime, at 12:01 a.m. on	the earlier of: (b) Th	e 90th day after	r the
	2023	·			
Dated		•			
Dated NOVEMBER 01	0 .				