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(Requestor's Name)					
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SHRIFCT		PECOS's ENTERPRISE LLC				
SUBJECT: Name of Limited Liability Company						
The enclose	ed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please retur	rn all correspo	ondence concerning this matter	to the following:			
		KRISTOPHER PECORAI	ко			
	Name of Person					
	PECOS'S ENTERPRISE LLC					
	Firm/Company					
	3333 MONUMENT RD					
Address						
	JACKSONVILLE, FL 32225					
	City/State and Zip Code					
		KRISTOPHER.PECORAR	•			
		E-mail address: (to be used for future annual report not	ification)		
For further	information c	oncerning this matter, please c	all:			
			at (
Name of Person			at () Area Code Daytin	ne Telephone Number		
Enclosed is	a check for th	ne following amount:				
≡ \$25.00	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)		
Mailing Address:		Street Address:				
Registration Section Division of Corporations			Registration Section Division of Corporations			
P.O. Box 6327			The Centre of Tallahassee			
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810				

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PECOS's ENTERPRISE 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 $\frac{13DEC2023}{12}$ __ and assigned Florida document number 1.23000549591 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: PECOS ENTERPRISE LLC 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: (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 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 Agent's Signature, if changing Registered Agent:

New Registered Office Address:

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

Enter Florida street address

_____. Florida ____

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
			□Add
			□Remove
			□ Change
			🗆 Add
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			□Change
			□Add
			□Remove
			[]Change

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: ______ (optional) (If an effective date is listed, the date must be specific and cannot be prior to date of tiling or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) 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 _____ 2024 Winger Signature of a member or authorized representative of a member KRISTOPHER PECORARO Typed or printed name of signee