## L24000156394

(Requestor's Name)
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## **COVER LETTER**

TO: Registration So Division of Cor					
	E PROJECTS GROUP LLC				
SUBJECT:	Name of Lin	ited Liability Company	· <del></del>		
The enclosed Articles of	Amendment and fee(s) are sub	emitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	LUIS FERNANDEZ				
		Name of Person			
	A TAX SOLUTIONS CO	RP			
	282				
	100 S				
		Address			
	MIAMI FL 33166		35		
	*****	City/State and Zip Code			
	INFO@ATAXSOLUTION		Ţri l		
For further information of	e-mail address; to concerning this matter, please c	to be used for future annual report no all:	(incaton)		
LUIS FERNANDEZ		305 600-6379			
Name c	of Person	at () Area Code Dayti	me Telephone Number		
Enclosed is a check for t	he following amount:				
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy radditional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed.		
Mailing Addre		Street Address: Registration S	ection		
Registration Section Division of Corporations		Division of Co			
P.O. Box 63.	27	The Centre of			
Tallahassee.	FL 32314	2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PINNACLE PROJECTS GROUP LLC		
( <u>Name</u> of the <u>Limited Liability Con</u> (A Florida Limit	npany as it now appears on our record ed Liability Company)	<u>s.</u> )
The Articles of Organization for this Limited Liability Compa $\frac{1.24000156394}{1.24000156394}$	nny were filed on (14/02/2024)	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	iability company here:	
The new name must be distinguishable and contain the words "Limited Li	ability 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)		
		- <u> </u>
B. If amending the registered agent and/or registered offic agent and/or the new registered office address here:	ce address on our records, <u>enter</u>	٠, -
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addres:	
	v.mer v tortaa sireet aaares:	,
	Flo	orida Zin Code
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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 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	JIMENA GUZZY RODRIGUEZ	4805 NW 79TH AVE SUITE 10 MIAMI FL 33166	🗆 Add
			Remove
			□Change
MGR	LUIS FERNANDO ALCALA VALLEJO	4805 NW 79TH AVE SUITE 10 MIAMI FL 33166	□Add
			<b>≡</b> Remove
			□ Change
MGR	LEAV HÖLDING CO	4805 NW 79TH AVE SUFFE 10 MIAMI FL 33166	
			□Remove
			□ Change
MGR	DIEGO VELAZQUEZ	4805 NW 79TH AVE SUITE 10 MIAMI FL 33166	
			Remove
			⇔ □Change
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ive date, if other than the cive date is listed, the date in first the date inserted in this lent's effective date on the	s block does not in	eet the applicab	date of time of the	(option of the control of the contro	filing.) Pursuant to 605
rd specifies a delayed effe led.	ctive date, but not a	an effective time	e, at 12:01 a.m. o	n the earlier of: (b	) The 90th day afte
October	<u> </u>	2024	- ·		
	A		zed representative o		