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(Requ	uestor's Name)
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COVER LETTER

Div	ision of Corpe	prations				3
SUBJECT:		PAVENTURE LLC	*	à	÷	•
		Name of Limit	ted Liability Company	· · ·		-
The enclosed	l Articles of A	mendment and fee(s) are subn	nitted for filing.			
Please return	all correspond	lence concerning this matter t	o the following:			
		ASTHONY M ASTOLE				
			Name of Person			
		BROADWAY VENTURE	LLC			
			Fum/Company			
		4251 SW 32ND STREET				
			Address			
		WEST PARK, bl. 33023				
			City/State and Zip Co	nle		
		anthony Imareta gmail.com		- .		
			the used for luture and	mal report notal	ication)	
For further in	nformation con	cerning this matter, please cal	II:			
ANTHONY	MASTOLIT		305	699-9763		
	Name of P	erson	at () Area Code	Daytime	: Telephone Nun	ther
Enclosed is a	check for the	following amount:				
■ \$25,00 F	iling Fee	LI \$30.00 Filing Fee & Certificate of Status	€ \$55.00 Filing F Certified Copy (additional copy is		Certil Certil) Filing Fee. icate of Status & ied Copy onal copy is enclosed)

Mailing Address:

TO:

Registration Section

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

BROADWAY VENTURE LLC

(A Florida Limited Liability Comp (A Florida Limited)	any as il now appears on o	ur records.)
(A Florida Limited	Liability Company)	
The Articles of Organization for this Limited Liability Company	- wars filed on 05/13/20	124
t a management of this connect channel company	were med on	and assigned
Florida document number 1.24000222758		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lial	oility company here:	
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designa	ion "LEC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
	<u></u>	
	<u>-</u>	
Entar non-mailing address: if any Contra		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent:	address on our record	s, enter the name of the new registere
Many Davids and O'C V. Lt		
New Registered Office Address:	Enter Florida str	vet address
	(Hy	Florida
New Registered Agent's Signature, if changing Registered Agent	·	Zar Cha
	-	
I hereby accept the appointment as registered agent and agi provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	r performance of my de provided for in Chapte	ities, and I om familiar with and er 605, F.S. Or, if this document is
If Cha	uging Registered Agent, Si	mature of New Registered Agens
		<i>D</i>

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
AMBR	Sandra Salazar Rodriguez	1100 Brickell Bay DR #63D, Miami, 14, 33131	= Add
			Remove
		<u> </u>	□Add
			□Remove
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ctive date, if other than the effective date is listed, the date mut: If the date inserted in this bit iment's effective date on the D	tock does not meet the ap	plicable statutory i	(opti or more than 90 days afte iling requirements, thi	ional) c filing.) Pursuant is date will not b	to 605,t oc listed
ord specifies a delayed effective	ce date, but not an effectiv	ve time, at 12:01 a	m, on the earlier of: (l	o) - The <u>90</u> ∯ day	y Mer
lited.					器
August 19th	2024				-
	· · · · · · · · · · · · · · · · · · ·	 '		(v) "	9
		/		1.7 -	
	Andrew Signature of a pember in a	sof-	-	(유ር) (미국) [메뉴	PH +:

Filing Fee: \$25.00