P17-000032459

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2024 AUG 22 AH 9: 51
SECRETARY OF STATE

M

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORAT	FION: PICO PROPI	ERTIES INVESTOR COL	RP		
DOCUMENT NUMBER	R:P17000092459				
The enclosed Articles of A	Amendment and fee are su	bmitted for filing.			
Please return all correspor	ndence concerning this ma	tter to the following:			
		ARIADNA OJEDA	\		
		Name of Contact Person	on	_	
		AYUDA CENTER			
<u></u>		Firm/ Company		_	
		8230 CORAL WAY			
-		Address		_	
	MIAMI, FL 33155				
		City/ State and Zip Co	de		
	A	DJEDA@AYUDACENTI	ER.COM		
	E-mail address: (to be us	sed for future annual repor	rt notification)		
For further information co	oncerning this matter, plea	se call:		SECRETARY OF ST TALLAHASSEE, H	2024 AUG 22
ARIADI	NA OJEDA	at (305	971-5232	AH	G 22
			ode & Daytime Telephone Numb	er SS	
Enclosed is a check for th	e following amount made	payable to the Florida De	partment of State:	EE.	AH 9: 51
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	ATE FL	51
Amendi Division P.O. Bo	<u>Address</u> ment Section n of Corporations ex 6327 ssee, FL 32314	Amer Divis The C 2415	t Address Indiment Section It ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 It hassee, FL 32303		

Articles of Amendment Articles of Incorporation of

PICO PROPERTIES INVESTOR CORP

ľ	TOO EKOLEK HES INVESTOR CORT				
(Name of Corpo	oration as currently filed with the Florid	la Dept. of State)			_
	P17000092459				
(D	ocument Number of Corporation (if know	n)			
Pursuant to the provisions of section 607.1006. Flits Articles of Incorporation:	forida Statutes, this <i>Florida Profit Corpord</i>	ution adopts the fo	llowing ameno	iment(s)) to
A. If amending name, enter the new name of t	he corporation:				
			The I	new	
name must be distinguishable and contain the wor "Inc.," or Co.," or the designation "Corp." "chartered," "professional association," or the a	Inc," or "Co". A professional corpore				
B. Enter new principal office address, if applie (Principal office address MUST BE A STREET				_	
		· · -		_	
			-· -		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u></u>	·		_	
			<u></u>		
			r SEC	2024	
D. If amending the registered agent and/or re- new registered agent and/or the new register		the name of the	RETARY OF	2024 AUG 22	
Name of New Registered Agent AYUDA CENTER			7.S.S.	32	Ï
Name of New Negistered Agent	8230 CORAL WAY		OF S.	سد چې	(
	(Florida street address)		——7 <u>5</u>	5	
New Registered Office Address:	MIAMI , Flori		33155		
New Neglistered Office Address.	(City)	1 101 tda	(Zip Code)	_	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered age		ligations of the pos	sition.		
	Signature of New Registered Agent, if cha	ทยุ่ทย			

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Remove

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change. Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones. V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
l) Change			
Add			
Remove			
2) Change			
Add			
Remove Change			
Add			
Remove			77 PA T
4) Change	 		AUG 22 A
Add			22 # 9: France B
Remove			1 SE
5) Change			FLE FLE
Add			
Remove			
6) Change			
Add			

If amending or adding additional Art (Attach additional sheets, if necessary).	(Be specific)			
_				
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			<u>-</u>	
			 	
		· · -		
	 -			
	-			
				
				
			SECRETARY OH S	
If an amendment provides for an evo	ange, reclassification, or cancellation of is	enad charac	PR PE	7
provisions for implementing the amo	ndment if not contained in the amendmen	t itself:	G 2	191.00
(if not applicable, indicate N/A)			至 2	
			SAC H	į
			9: 5 STF	_
			<u> </u>	
,				
				

The date of each amendment(s) ad date this document was signed.	option:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date))
Note: If the date inserted in this blocoument's effective date on the Dep	ock does not meet the applicable statutory filing requirement partment of State's records.	is, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adoption was not required.	oted by the incorporators, or board of directors without shareholders	older action and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The number of votes cast for the am ficient for approval.	endment(s)
	oved by the shareholders through voting groups. The followin each voting group entitled to vote separately on the amendmen	
"The number of votes cast f	or the amendment(s) was/were sufficient for approval	
by	<u></u>	
	(voting group)	
Dated	Nario A. Pino	
Signature		
selected	ector, president or other officer – if directors or officers have by an incorporator – if in the hands of a receiver, trustee, or of d fiduciary by that fiduciary)	
	MARIO A PICO	AFRY PROPERTY OF THE PROPERTY
-	(Typed or printed name of person signing)	ラスター T C T T T T T T T T T T T T T T T T T
_	PRESIDENT	9: 51 E. FA
_	(Title of person signing)	- H