

L13 000057342

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

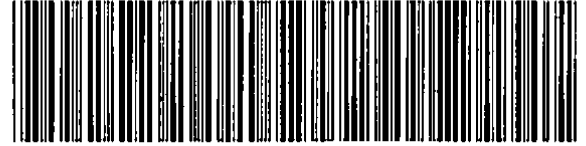
(Business Entity Name)

(Document Number)

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08/07/19

2019 AUG - 7 PM 1:41  
SECRETARY OF STATE  
TALLAHASSEE, FL

FILED

AUG 12 2019  
C. Kinsey

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: WESO GROUP LLC  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

GABRIEL OMAR Biz  
Name of Person  
Weso Group LLC  
Firm/Company  
P.O. Box 226948  
Address  
Miami, FL, 33222  
City/State and Zip Code  
weso92@yahoo.com.ar  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

GABRIEL Biz at (305) 302-7972  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the 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)
- ↳ Enclosed

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

WESO GROUP, 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 04/18/2013 and assigned Florida document number L 13000057342.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability 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)

P.O. Box 226948  
MIAMI, FL, 33222

FILED  
2019 APR -7 PM 1:41  
SECRETARY OF STATE  
TALLAHASSEE, FL

B. If amending the registered agent and/or registered office address on our records, enter the name of the registered agent and/or the new registered office address here:

Name of New Registered Agent:

GABRIEL OMAR BIZ

New Registered Office Address:

4831 NW 99 CT

Enter Florida street address

DORAL

City

Florida

33178

Zip 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 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

or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Act</u>
MGR.	BIZ, GABRIEL OMAR	P.O. BOX 226948, MIAMI FL, 33178	<input type="checkbox"/> Add <input type="checkbox"/> Remove <input checked="" type="checkbox"/> Change
MGR.	LAGE, GABRIELA VERONICA	P.O. BOX 226948, MIAMI FL, 33178	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
MGR.	BIZ LAGE, WENDY MELANIE	P.O. BOX 226948, MIAMI FL, 33178	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
MGR.	BIZ LAGE, SOPHIE EVELYN	P.O. BOX 226948, MIAMI FL, 33178	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change

