

L1300006408

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

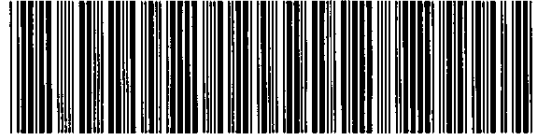
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
15 MAY 26 PM 1:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUN 1 2015

T. HAMPTON

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Safeguard International 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:

Luis M. Almaguer
Name of Person
Safeguard International Group, LLC
Firm/Company
716 NW 128 Avenue
Address
Miami, Fl. 33182
City/State and Zip Code
Luis@sgigmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Merling Almaguer at (786) 227-4168
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)

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**

Safeguard International 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 05/02/2013 and assigned Florida document number L13000064808.

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:

716 NW 128 Avenue

(Principal office address MUST BE A STREET ADDRESS)

Miami, Fl 33182

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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TALLAHASSEE FLORIDA

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:

Merling Almaguer

New Registered Office Address:

716 NW 128 Avenue

Enter Florida street address

Miami

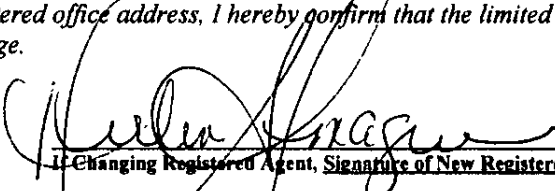
City

, Florida 33182

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 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.


Merling Almaguer
If Changing Registered Agent, Signature of New Registered Agent

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>	<u>Address</u>	<u>Type of Action</u>
MGR	Luis M. ALmaguer	716 NW 128 Avenue	<input checked="" type="checkbox"/> Add
		Miami, Florida 33182	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Jose R. Ramirez	1780 West 38 Place	<input type="checkbox"/> Add
		Hialeah, Fl 33012	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Merling Almaguer	716 NW 128 Avenue	<input checked="" type="checkbox"/> Add
		Miami, Florida 33182	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Lined area for amending information.

E. Effective date, if other than the date of filing: May 2nd, 2015 (optional)
(If an effective date is listed, the date must be specific and cannot be prior to date of filing 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 May 5th, 2015

Handwritten signature of Luis M. Almaguer

Signature of a member or authorized representative of a member

Luis M. Almaguer

Typed or printed name of signee

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TALLAHASSEE, FLORIDA