## 

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





06/14/21--01024--001 \*\*30.00





## **COVER LETTER**

TO: Registration S Division of Co			
	na Group, LLC		
SUBJECT:	Name of Lin	ited Liability Company	<del> </del>
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Jorge Colina		
		Name of Person	<u> </u>
	Jorge Colina Group, LLC		
		Firm/Company	
	1085 NW 164 Avenue		
		Address	
	Pembroke Pines, Florida 3	3028	
	icalina (dianggarahina graya)	City/State and Zip Code	
	jcolina@jorgecolinagroup.c	to be used for future annual report notifi	cation)
For further information	concerning this matter, please c	all:	
Yamilet Aguilera		954 815-1581 at ( )	
Name	of Person	Area Code Daytime	Telephone Number
Enclosed is a check for	the following amount:		
□ S25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addre Registration Division of ( P.O. Box 63 Tallahassee,	Section Corporations 27	Street Address: Registration Sectorial Division of Corporate Centre of Ta 2415 N. Monroe Tallahassee, FL.	oorations allahassee Street, Suite 810

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Jorge Colina Group, LLC	
(Name of the Limit	ed Liability Company as it now appears on our records.) (A Florida Limited Liability Company)
The Articles of Organization for this Limited Li Florida document number L21000084966	• 1
This amendment is submitted to amend the follo	owing:
A. If amending name, <u>enter the new name of</u>	the limited liability company here:
The new name must be distinguishable and contain the w	ords "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applica	able:
(Principal office address MUST BE A STREE	T ADDRESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE I	BOX)
B. If amending the registered agent and/or reagent and/or the new registered office addres	egistered office address on our records, <u>enter the name of the new register</u> <u>s here</u> :
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	Florida
	, Florida, Florida

## 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	Orlando I. Aguilera	1085 NW 164 Avenue, Pembroke Pines, FL 33028	<b>=</b> Add
			□Remove
			□ Change
MGR	Sandra Bayona-Colina	1085 NW 164 Avenue, Pembroke Pines, FL 33028	<b>=</b> Add
			□Remove
			□Change
		<u></u>	□Add
			□Remove
			DChange
			□Add
			□Remove
			□Change
			□Add
			Remove
			Chánge
			Change
			☐ □Remove
			F) Chapute

<del></del>					
	<del> </del>				
					<del>.</del>
			···		
	-				
					<del></del>
		<del></del>			
		<u>.</u>			
<del></del> -					
				<u>-</u>	
				<del></del>	
Effective date, if other If an effective date is listed, the Note: If the date inserted document's effective date.	he date must be specific I in this block does n	c and cannot be prior to not meet the applica	to date of filing or more able statutory filing r	(optional) than 90 days after filing equirements, this date	.) Pursuant to 605.0207 (
e record specifies a delayerd is filed.	ed effective date, but	not an effective tir	me, at 12:01 a.m. on	the earlier of: (b) T	
June 8		2021			1021
Dated			=-		2021 JUH 14 PH 3: 3

Typed or printed name of signce