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MAY 3 0 2013 T. HAMPTON

COVER LETTER

TO: Registration Section
Division of Corporations

InBloom 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:

Hortensia Ullivarri

Name of Person

InBloom Group LLC

Firm/Company

2500 NW 79 Ave, Ste 215

Address

Doral, FL 33122

City/State and Zip Code

hortensia@inbloomgroup.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Hortensia Ullivarri

, 305 **, 436-0030**

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

InBloom Group LLC		
(Name of the Limited Liabili	ty Company as it now appears on a Limited Liability Company)	our records.)
(A Florida	a Limited Liability Company)	- 9
	2/5/200	<u>~ ~ ≤∞</u>
The Articles of Organization for this Limited Liability	Company were filed on 2/5/200	and assigned
Florida document number L0400009908		A AME
Piorida document flumber	·	29 FAR
This amendment is submitted to amend the following:		AH 10: 34
This amendment is submitted to amend the following.		5 3 3 3 5 3 5 3 5 5 5 5 5 5 5 5 5 5
A. If amending name, enter the new name of the lin	mited lighility company here:	: <u>3</u>
A. If amending name, enter the new name of the in	mined hability company here.	F XX
The new name must be distinguishable and end with the w	ords "Limited Liability Company,"	the designation "LLC" or the abbreviation
"L.L.C."		
Enter new principal offices address, if applicable:		
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADL	ORESS)	
	• • • • • • • • • • • • • • • • • • • •	
Enter new mailing address, if applicable:		
• • • • • • • • • • • • • • • • • • • •		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or regi		ecords, enter the name of the new
registered agent and/or the new registered office ad	<u>ldress here</u> :	
N		
Name of New Registered Agent:		
N D		
New Registered Office Address:	Fraton E	lorida street address
	Enter F	ioriaa sireet aaaress
		, Florida
	City	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 608, 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

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u> Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Pablo Egas	PO BOX 527626	Add
		DORAL, FL 33152	Remove
		•	
<u> </u>			
			Remove
			Add
			Remove
			Add
			ADIVISER OF C
			LED RY OF STATE CORPORZETIONS
			Remove
			Add
			Remove

D. If amending any other inforr	nation, enter change(s) here:	(Attach additional sheets, if necessary.)
ı		
December 1	2012	
	Signature A a member or authoriz	ed Tepresentative of a member
Hortensia Ulli	varri	•
-	Typed or printed n	name of signee

Page 3 of 3

Filing Fee: \$25.00

13 MAY 29 AH 10: 34