L050000044363

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	#)
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COVER LETTER

TO:

	Registration Sect Division of Corp					
_		nd Group, LLC.	•	•		
SUBJEC	T:	Name of Lim	ited Liability Company			
The encl	osed Articles of A	mendment and fee(s) are sub	mitted for filing.			
Please re	turn all correspon	dence concerning this matter	to the following:			
	HAIM BENZINO					
			Name of Person			
			Firm/Company			
10777 WEST SAMPLE ROAD #716						
			Address			
		CORAL SPRINGS, FLOR	IDA 3306 5			
		HBENZINO@AOL.COM	City/State and Zip Code	2020 AUS 21		
		E-mail address: (to be used for future annual report notification)			
For furth	er information co	ncerning this matter, please ca	all:			
HAIM E	ENZINO		954 850-3131 at ()	The state of the s		
	Name of I	Person	Area Code Daytime Telephone Nu	mber 👼 👸		
Enclosed	is a check for the	following amount:				
■ \$25 .	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy Cert (additional copy is enclosed) Certified Copy	00 Filing Fee, ificate of Status & ified Copy tional copy is enclosed)		
	Mailing Address: Registration So Division of Co P.O. Box 6327 Tallahassee, Fl	ection orporations	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Sui Tallahassee, FL 32303	te 810		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PROMISED LAND 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 and assigned Florida document number _____L05000044363 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 "LLC. Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 10777 W. SAMPLE ROAD #716 Enter new mailing address, if applicable: CORAL SPRINGS, FLORIDA 33065 (Mailing address MAY BE A POST OFFICE BOX) 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: HAIM BENZINO Name of New Registered Agent: 10777 W. SAMPLE ROAD New Registered Office Address: Enter Florida street address

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.

City

CORAL SPRINGS

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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	BAT-EL BENZINO	10077 COBBLESTONE CREEK DR.BOYNTON F	3E/ □Add
			= Remove
			□Change
			□Add
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an effective date is lister ote: If the date inser	d, the date must be spe ted in this block do	cific and cannot be prior es not meet the applic	to date of filing or mable statutory filin	ore than 90 days after f	nal) lling.) Pursuant to 605.020 date will not be listed as
		ent of State's records		5 rodanomomot uno	date will not be listed a
	ayed effective date.	but not an effective to	ime, at 12:01 a.m.	on the earlier of: (b)	The 90th day after the
is filed.					
AUGUST	17	2020			
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	1	and _		of a member	
	Signat	eed of a member or auth	orized representative	of a member	