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(Re	questor's Name)			
(Ad	dress)			
(Ad	dress)	·		
(Cit	y/State/Zip/Phone	· #)		
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/Ru	siness Entity Nam	20)		
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(Do	cument Number)			
Certified Copies	S Certificates of Status			
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Special Instructions to I	Filing Officer:			
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SECRETARY OF STATE

3 JUN 23 PH 12:

62408

`TO-

Registration Section
Division of Corporations

SUBJECT:	LML Group, LL
	(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:

LISA LICHTBRAUN_
(Name of Person)
EM-L Group. LLC. (Firm/Company)
(Firm/Company)
8725 NW 3rd COURT
(Address) ~
Plantation, Floring 33324 (City/State and Zip Code)
(City/State and Zip Code)

For further information concerning this matter, please call:

LISA LICHTBRAUN

at (959) 559-4295 (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

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	LML Group, LLC		_	
	(Present Name) (A Florida Limited Liability Company)			
		•		
FIRST:	The Articles of Organization were filed on 11704 24, 2006 and assigned document number 10 6 0000 55770			
SECOND:	This amendment is submitted to amend the following:			
	all address change From			
	all address change From 395 NW 87th Jerrace			
	Plantation, FLORIDA 33324			
	<i>f</i> 0			
	LMIL CROUP, LLC			
	8725 NW 3rd Court	IALL SEC	C 8.0	
	Plantation, PLURIDA 83324	AHASA ASA	08 JUN 23	_
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		HOSTA STA	PH 12: 45	
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Dated	6/12/2008,			
•	,			
	Here Live			
	Signature of a member or authorized representative of a member			
	LISA LICHTBRAUN			
	Typed or printed name of signee			

Filing Fee: \$25.00