Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : SERBER & ASSOCIATES, P.A.

Account Number : I20000000083 Phone : (305)932-6262 Fax Number : (305)933-9393

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN FIRST GROUP, L.L.C.

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K. SALY EXAMINER

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COVER LETTER

TO:

Registration Section Division of Corporations

CHRIPCT.

FIRST GROUP, L.L.C

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:

Maria M. Calderon

Name of Person

Serber & Associates P.A.

Firm/Company

2875 NE 191 Street- Suite 801

Address

Aventura - Florida - 33180

City/State and Zip Code

mmc@serberlawfirm.com

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

For further information concerning this matter, please call:

Maria M. Calderon

,,305,932-6262

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

© \$25.00 Filing Fee

S30.00 Filing Fee & Certificate of Status

Cl \$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 Tallahossee, FL 32314 STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

FILED 2014 JUN 23 AM ID: 27 SECKETARY OF STATE FALLAHASSEE, FLORID:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	TRST GROUP, L.L.C		
(Name of the Limited Lie (A.F.)	ibility Company as It now apprints Limited Liability Company	y)	
The Articles of Organization for this Limited Liability Florida document number L06000062494	ty Company were filed on	06/19/2006	and assigned
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 end with the words	"Limited Liability Company,"	the designation "LLC" or the	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET AL	DRESS)		
P-4			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX			
			
B. If amending the registered agent and/or registered agent and/or the new registered office a		on our records, ente	er the name of the new
Name of New Registered Agent:	<u> </u>		······································
New Registered Office Address:			
	Enter i	Torida street address	
		, Florida	Zip Code
	City		Zip Code
New Registered Agent's Signature, if changing Regist	ered Agent:		
I hereby accept the appointment as registered ago provisions of all statutes relative to the proper an accept the obligations of my position as registered being filed to merely reflect a change in the regist company has been notified in writing of this chan	d complete performance d agent as provided for i tered office address, I he	of my duties, and I ar n Chapter 605, F.S. C	n familiar with and r, if this document is
	If Changing Registered	Agent, Signature of New	Registered Agent

Page 1 of 3

MGR = Manager

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

AMBR = Authorized Member Title Type of Action Address Name 4651 SHERIDAN STREET, STE. 440 KUBILIUN, LILIANNE B **AMBR** HOLLYWOOD, FL 33021 Remove _D Add _□ Remove _D Add _ 🖾 Remove □ Add __ 🗆 Всточе □ Add _ Remove __□ Add __ 🖸 Remove

e V of the Articles of Organization for First Group LLC shall be deleted in its entirely and	
ed with the following: "Article V- Management: The management of the Limited Liability Company	
erved to the Managers. The Managers of the Limited liability company sre:Harry Breun - Address: 4651	
IIDAN St., # 440, HOLLYWOOD, FL 33021, Joseph Braun - Address: 4651 SHERIDAN ST.#440	
LLYWOOD, FL 3302	
date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after document is filed by the Florida Department of State)	F-2
Signature of a member or authorized representative of a member JOSEPH BRAUN Typed or printed name of signee	THE STATE OF THE S
e	erved to the Managers. The Managers of the Limited liability company ere:Harry Braun - Address: 4651 RIDAN St., # 440, HOLLYWOOD, FL 33021, Joseph Braun - Address: 4651 SHERIDAN ST.#440 LLYWOOD, FL 3302 ate, if other than the date of filling: determust be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after document is filed by the Florida Department of State) ay, 13 Signature of a member or authorized representative of a member JOSEPH BRAUN

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Filing Fee: \$25.00