L06000106435

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(Address)				
(Address)				
(City/State/Zip/Phone #)				
(Business Entity Name)				
(Document Number)				
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A. LUNT				
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06/20/14--01009--017 **25.00

FILED 2014 JUN 20 PM IR 05

COVER LETTER

TO: Registration Section Division of Corporations'

Genesis Development Group, LLC

SUBJECT:

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:

Harold Green

Genesis Development Group, LLC	
Genesis Development Group, LLO	
Firm/Company	
1521 Alton Rd, Suite 798	2014 - 14 11 - 14 12 - 14 12 - 14 14 14 14 14 14 14 14 14 14 14 14 14 1
Address	
Miami Beach, FL 33139	uat. ⊂ (***=
City/State and Zip Code	*** * *
green2300@aol.com	

For further information concerning this matter, please call:

Harold Green 786 317-1997 _________at (_____) _______Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

\$25.00 Filing Fee

S30.00 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

Genesis Development 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
L06000106435	
Florida document number	

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

N/A

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

1521 Alton Rd, Suite 798

Miami Beach, FL 33139

Enter new mailing address, if applicable:		Same as ab	ove		2 1 	2014 .7.5	
(Mailing address MAY BE A POST OFFICE	<u> </u>					20	
B. If amending the registered agent and registered agent and/or the new registered of	l/or registered offic <u>office address here</u> :	e address on	,	ecords, <u>e</u>	C g	<u>ame</u> o ₩:05	f the new
Name of New Registered Agent:	Valerie Brown				•		
New Registered Office Address:	1521 Alton Rd	, Suite 798	/	NEW)		
		Enter Flore	da street	address			
	Miami Beach			_, Florid	a <u>33139</u>		
		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 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 Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

Authorized Member being added or removed from our records:

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L

i.

<u>Title</u>	Name	Address	Type of Actio
ambr	Harold Green	1521 Alton Rd, Suite 798	Add
		Miami Beach, FL 33139	Remove
			Add
			Remove
			Add
			
			Remove
			🗆 Add
			□ Remove
<u></u>			Add
			Add

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

ļ , . E. Effective date, if other than the date of filing: (optional) (The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State) June 17 2014 Dated Signature of a member or authorized representative of a member Valerie Brown Typed or printed name of signee



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Page 3 of 3 Filing Fee: \$25.00