

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255

: (305)634-3694

Fax Number : (305)633-9696

\*\*Enter the small address for this business entity to be used for future affinal report mailings. Enter only one email address please.\*\*

0F.S.

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ENITUXIA GROUP, LLC

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Corporate Filing Menu

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5/24/2013

EMPIRE CORP

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## H13000116624

## **COVER LETTER**

TO: Registration So Division of Cor				
SUBJECT:	ENITUXIA Name of Limit	CROUP LLC ted Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Man	Name of Person		
	٠.٨	S. NESS SOLUTIONS Firm/Company	Inc.	
	SK	Address LAKE DR	\\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	F
	-JOCK Soddie	City/State and Zip Code	L PHI2: 22  RY OF STARS SEC. FRORTH	
	E-mail address: (i	© Li√F COM o be used for future annual report notificati	DRIE 22	
For further information of	concerning this matter, please c	all:		
Madica Name o	CAPULLA	at ( <u>863</u> ) <u>513</u> <u>477</u> Area Code & Duytime Te	7 7 elephoae Number	
Enclosed is a check for the	he following amount:			
325.00 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 52314 STREET/COURIER ADDRESS: Registration Section

Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

H13000116629

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

NITUXIA GROUP L  (Name of the Limited Riability Con (A Plorida Limit	npany as it now as	opears on our records.)		
The Articles of Organization for this Limited Liability Comp Florida document number 1.09000 26620.	eany were filed on	03/18/2009	and assigned	
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited  The new name must be distinguishable and end with the words "I			C" or the abbreviati	_ ion
"L.L.C."	·		,	
Enter new principal offices address, if applicable:	<del></del>		\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
(Principal office address MUST BE A STREET ADDRESS	<u></u> _			_
Enter new mailing address, if applicable:  (Mulling address MAY BE A POST OFFICE BOX)			AY24 PHIZ 22 ETARY OF STATE HASSEE, FEGREL	- T
B. If amending the registered agent and/or registered registered agent and/or the new registered office address		on our records, enter th	e name of the n	<u>ew</u>
Name of New Registered Agent:	·			-
New Registered Office Address:				
		Enter Florida struet addr	67.2	_
•		. Florida		
	City		Zip Code	-
New Registered Agent's Signature, if changing Registered Ag	ent:			

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

Page 1 of 3

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:

MGRM = Managing Member <u>Title</u> Name Address Type of Action 10545 NW 29 TERRACE POBERTO BERGONZA MIANI, FL 33172 10545 NW 29 TERROCE X Add LANGFORE INTERNITIONAL CORP. MGRM Remove Remove

Page 2 of 3

MGR = Manager

H130001110639

•	I amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
ıt	May 24th 2013.
	Signature of member or authorized representative of a member
	TORGE E VERIAZZA — Typed or printed name of signee
	Typed or printed name of signee

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FINO