

L09000084563

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

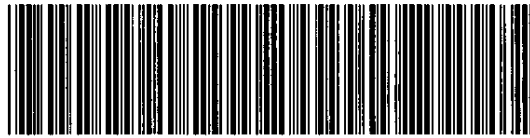
(Business Entity Name)

(Document Number)

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09/21/09--01031--004 **25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 SEP 21 AM 8:56

B. KOHR

SEP 22 2009

EXAMINER

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 SEP 21 AM 8:56

**PLEASE FIND ENCLOSED A CHECK IN THE AMOUNT
OF \$25.00 TO COVER THE FEES FOR ARTICLES OF
AMENDMENTS TO ARTICLES OF ORGANIZATION OF:
DRAGONFLY GROUP, LLC**

THANK YOU.

**PLS CALL ME IF YOU HAVE ANY QUESTIONS AT: 305-
710-0516.**

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Add New Members
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:

Sanda F. Eusepi

Name of Person

DRAGONFLY GROUP LLC

Firm/Company

1760 NE 144TH ST

Address

MIAMI, FL 33181

City/State and Zip Code

SANDA.EUSEPI@GMAIL.COM

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

For further information concerning this matter, please call:

SANDA F. EUSEPI

Name of Person

at (305)

710-0516

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

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

DRAGONFLY GROUP, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 SEP 21 AM 8:56

The Articles of Organization for this Limited Liability Company were filed on 9-2-09 and assigned
Florida document number L09000084563.

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)

Enter new mailing address, if applicable:

(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:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

_____, Florida

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 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

