

L10000006972

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

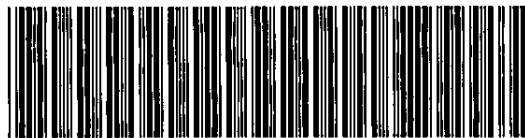
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



500254570655

12/16/13--01048--018 \*\*30.00

FILED

2013 DEC 16 PM 3:47

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DEC 17 2013  
T. HAMPTON

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: **TAGRUP-USA LLC**

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:

**ALEJO ADRIAN CARDONA**

Name of Person

**TAGRUP-USA LLC**

Firm/Company

**7080 NW 50TH ST. #1**

Address

**MIAMI FL 33166**

City/State and Zip Code

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

For further information concerning this matter, please call:

**ALEJO ADRIAN CARDONA** at ( **305** ) **283-7701**

Name of Person

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**

**TAGRUP-USA 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 01/20/2010  
Florida document number L10000006972

FILED  
2013 DEC 16 PM 3:47  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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 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:

LIGIA CALVO

New Registered Office Address:

7080 NW 50TH ST #1

*Enter Florida street address*

MIAMI

*City*

Florida 33166

*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.*

*Ligia Calvo*  
**If Changing Registered Agent, Signature of New Registered Agent**

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:

MGR = Manager  
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	ALEXIS MENESES	7080 NW 50TH ST MIAMI FL 33166	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	LUCIA C CANEZ DE MENESES	7080 NW 50TH ST MIAMI FL 3316	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	LIGIA CALVO	1790 - 79 ST CAUSEWAY APT. B107 N. BAY VILLAGE FL 33141	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	ALEJO ADRIAN CARMONA	20817 SW 121 AVE MIAMI FL 33177	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

2013 DEC 16 PM 3:47  
FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

---

---

---

---

---

Dated \_\_\_\_\_, \_\_\_\_\_.

Ligia Calvo  
Signature of a member or authorized representative of a member

LIGIA CALVO

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

**FILED**  
2013 DEC 16 PM 3:47  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA