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## **COVER LETTER**

TO: Registration S Division of Co			
	ERNATIONAL GROUP LLC	,	
SUBJECT:	Name of Limi	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	ARIEL FURMAN		
		Name of Person	
	KAPITAL GROUP LLC		
		Firm/Company	· · · · · · · · · · · · · · · · · · ·
	1882 TYLER ST		
		Address	
	HOLLYWOOD, FL 33020	)	
	<del> </del>	City/State and Zip Code	<del></del>
	AFURMAN@KAPITALGI		
	E-mail address: (	to be used for future annual report notif	fication)
For further information	concerning this matter, please ca	all:	
ARIEL FURMAN		305 503-1756	
Name	of Person	Area Code Daytime	e 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

MSC INTERNATIONAL GROUP	•	
(Name of the Limi	ted Liability Company as it now app (A Florida Limited Liability Company	ears on our records.)
The Articles of Organization for this Limited I	iability Company were filed on	09/20/2010 and assigned
Florida document number L10000015866	·	
This amendment is submitted to amend the fol	lowing:	
A. If amending name, <u>enter the new name (</u>	of the limited liability company	here:
The new name must be distinguishable and contain the	words "Limited Liability Company," th	e designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	
Principal office address MUST BE A STRE	ET ADDRESS)	
		<b>产资</b>
		O.D.
Enter new mailing address, if applicable:	<del></del>	No. No.
<u>Mailing address MAY BE A POST OFFICE</u>	<u></u>	
	<del> </del>	
		\$\frac{1}{2}\$
		on our records, enter the name of the n
egistered agent and/or the new registered of	office address here:	
Name of New Registered Agent:	KAPITAL GROUP LLC	
New Registered Office Address:	1882 TYLER ST	•
New Registered Office Address.	Enter 1	Florida street address
	HOLLYWOOD	, Florida 33020
	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

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	KAPITAL GROUP LLC	1882 TYLER ST	<b>■</b> Add
		HOLLYWOOD, FL 33020	Remove
			Change
MGR	SAIDON, MARTIN	1882 TYLER ST	
		HOLLYWOOD, FL 33020	■ Remove
			Ghange
MGR	FURMAN, ARIEL	1882 TYLER ST	
		HOLLYWOOD, FL 33020	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~
			CONTRACTOR
			□ Add
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ffective date if other than the date of filing: 12/08/2016	(antianal)	
an effective date, if other than the date of filing:  an effective date is listed, the date must be specific and cannot be prior to tote:  If the date inserted in this block does not meet the application occument's effective date on the Department of State's records.	to date of filing or more than 90 days after filing.) Pursuant to 605.020 able statutory filing requirements, this date will not be listed a	17 (3 .s th
e record specifies a delayed effective date, but not The 90th day after the record is filed.	t an effective time, at 12:01 a.m. on the earlier o	of:
ated DECEMBER 8TH 2016	Human	

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Typed or printed name of signee

Filing Fee: \$25.00