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T. CLINE

FEB 15 2011

EXAMINER

FILED
2011 FEB 14 AM 11:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BEST CONCIERGES GROUP 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:

ELEONORA TODARO

Name of Person

BEST CONCIERGES GROUP, LLC

Firm/Company

860 COLLINS AVENUE SUITE 204

Address

MIAMI BEACH, FLORIDA 33139

City/State and Zip Code

INFO@JETSETGROUPLLC.COM

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

For further information concerning this matter, please call:

ELEONORA TODARO

Name of Person

at (305) 798 3095

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

2011 FEB 14 AM 11:16
RECEIVED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

BEST CONQUERERS 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 02/22/2016 and assigned

Florida document number L10000020016

FILED
2016 FEB 14 AM 11:16
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)

860 COLLINS AVENUE
SUITE 204
MIAMI BEACH, FLORIDA 33139

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

860 COLLINS AVENUE
SUITE 204
MIAMI BEACH, FLORIDA 33139

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:

JET SET GROUP, LLC

New Registered Office Address:

860 COLLINS AVENUE

Enter Florida street address

MIAMI BEACH

City

Florida

33139

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

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	ALESSANDRO LOGTELY	860 COLLINS AVENUE SUITE 207 MIAMI BEACH, FLORIDA 33139	<input type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	TET 865 GROUP, LLC	860 COLLINS AVENUE SUITE 207 MIAMI BEACH, FLORIDA 33139	<input type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	ELEONORA TODARO	860 COLLINS AVENUE SUITE 207 MIAMI BEACH, FLORIDA 33139	<input type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	MICHELLE HAILFON	860 COLLINS AVENUE SUITE 207 MIAMI BEACH, FLORIDA 33139	<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

Dated 02/09/2024, 8

Alessandro Logtely
Signature of a member or authorized representative of a member

ALESSANDRO LOGTELY
Typed or printed name of signee