

L100000B1268

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. SAULSBERRY  
EXAMINER

NOV 15 2010

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: L & L SOUTHERN GROUP, L.L.C.  
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:

CARLOS A. MACCHI

Name of Person

WEALTH PROJECTS GROUP COMPANY

Firm/Company

P. O. BOX 161976

Address

MIAMI, FL 33116-1976

City/State and Zip Code

macchiins@bellsouth.net

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
C11570

For further information concerning this matter, please call:

CARLOS A. MACCHI

Name of Person

at ( 305 ) 967-0471

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**

**L & L SOUTHERN GROUP, L.L.C.**

(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 03/22/2010 and assigned  
Florida document number L10000031268.

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)**

40 N.E. 1 st STREET SUITE 101

MIAMI, FL 33132-2458

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

40 N.E. 1 st STREET SUITE 101

MIAMI, FL 33132-2458

**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:

DANIEL JULIAN MACHUCA

New Registered Office Address:

40 N.E. 1 st STREET SUITE 101

*Enter Florida street address*

MIAMI

, Florida 33132-2458

*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.*

*(Signature)*  
**If Changing Registered Agent, Signature of New Registered Agent**

**DANIEL JULIAN MACHUCA**

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	LEANDRO L JASZCHUCK	1818 S.W. 1 st AVENUE #708 MIAMI, FL 33129-1183	<input type="checkbox"/> Add <input checked="" 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
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

DANIEL JULIAN MACHUCA NAMED MGRM

FEIN: 27-2160410

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TALLAHASSEE, FLORIDA

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FILED

Dated NOVEMBER 8, 2010

LLJ

DJM

Signature of a member or authorized representative of a member

LEANDRO L. JASZCHUCK

DANIEL JULIAN MACHUCA, MGRM

Typed or printed name of signee