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(Re	questor's Name)	
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DA)	aress)	
(Cit	y/State/Zip/Phone	e #)
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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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2021 AUG 18 PH 12: 56 SEGRETARY OF STATE

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COVER LETTER

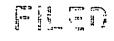
	Registration S Division of Co			•
CUB IE	TT.	s Magnified Group, LLC		
SUBJEC	,l:	Name of Lin	nited Liability Company	
The encl	osed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please re	turn all corresp	ondence concerning this matter	to the following:	
		Jean Fils		
			Name of Person	
		MagniFyle.com	nent and fee(s) are submitted for filing. concerning this matter to the following: In Fils Name of Person gniFyle.com Firm/Company 1 Brickell Avenuc Suite: 800 Address uni. FL 33131 City/State and Zip Code magnifyle.com E-mail address: (to be used for future annual report notification) ing this matter, please call:	
		1101 Brickell Avenue Sui	te: 800	
			Address	
		Miami, FL 33131		
			City/State and Zip Code	
		ra@magnifyle.com	(L	(Marting)
For furth	er information of	concerning this matter, please c		inneation
Jean Fils	S			
	Name (of Person		me Telephone Number
Enclosed	l is a check for t	he following amount:		
\$25. 6	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status & Certified Copy
	Mailing Addre			
	Registration Division of (
	P.O. Box 632		The Centre of	

Tallahassee, FL 32314

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2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



2021 AUG 18 PM 12: 56

Innovations Magnified Group, LLC		CECOUTION OF STATE
(Name of the Limited Liability Co (A Florida Limi	mpany as it now appears on our reted Liability Company)	records VETARY OF STATE
he Articles of Organization for this Limited Liability Comp	any were filed on Objection	and assigned
orida document number L10000081053		
his amendment is submitted to amend the following:		
a. If amending name, enter the new name of the limited	liability company here:	
he new name must be distinguishable and contain the words "Limited I	Liability Company," the designation	"LI.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS	<u> </u>	
Enter new mailing address, if applicable:	<u> </u>	
Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered of	fice address on our records,	enter the name of the new register
agent and/or the new registered office address here:		
Name of New Registered Agent:	<u> </u>	
N. D. Caral Office Address:		
New Registered Office Address:	Enter Florida street	address
		, Florida Zip Code
	City	Zip Code
New Registered Agent's Signature, if changing Registered A	gent:	
		e e al
I hereby accept the appointment as registered agent and provisions of all statutes relative to the proper and comp accept the obligations of my position as registered agen	piete perjormance oj my aut t as provided for in Chapter	605, F.S. Or, if this document is
being filed to merely reflect a change in the registered of company has been notified in writing of this change.	office address, I hereby conf	irm that the limited liability

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> Fitle</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Katherine I. Borrero	1385 Brookwood Forest Blvd Apt 207	□Add
		Jacksonville, FL 32225	≣Remove
			Change
MGR Jean Fils	1101 Brickell Avenue Suite: 800	= Add	
		Miami, FL 33131	□Remove
			Change
			□Add
			□Remove
			□Change
			□Add
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			Jean Fils was the			
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Effective date, if other fan effective date is listed,	than the date of	of filing:	prior to date of fili	ng or more than 90	(optional) days after filing.) P	ursuant to 605.020
Note: If the date inserte	d in this block do	es not meet me a	ppiicabie suituo	ry filing requires	nents, this date wi	ll not be listed a
document's effective da	te on the Departm	ent of State's rec	ords.			
				1 a mar on the see	dier of th). The	Oth day after the
e record specifies a delay rd is filed.	ed effective date,	but not an effect	ive time, at 12:0	a.m. on the car	ner or. (b) The	, <u>, , , , , , , , , , , , , , , , , , </u>
August 11 Dated		2021	·			
		Jean Z	or in Eigh			
		year L	user I les			

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Filing Fee: \$25.00