L10000083602

(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:					

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C. LEWIS

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EXAMENER

SECRÉTARY DE STATE.
TALLAHASSEE ELORION

LAZARUS

CORPORATE FILING SERVICE

3320 SW 87TH AVENUE

MTAMI, FL 33165 (305) 552-5973

MIAMI, FL 33105 (305) 5:		
	Office Use Only	
CORPORATION NAME(S) & DOCUM	MENT NUMBER(S), (if known):	· ,
	eoup LLC	
(Corporation Name)	(Document #)	
		
(Corporation Name)	(Document #)	
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(Corporation Name)	(Document #)	
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(Corporation Name)	(Document #)	
Walk in Pick up time _	200 Certified C	ору
☐ Mail out ☐ Will wait	Photocopy Certificate	of Status (2)
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NEW FILINGS	AMENDMENTS	·
Profit Not for Profit	Amendment Resignation of R.A., Officer/Direct	tor
Limited Liability Domestication	Change of Registered Agent Dissolution/Withdrawal	
Other	Merger	
OTHER FILINGS	REGISTRATION/QUALIFICATIO	<u>N</u>
☐ Annual Report	☐ Foreign	
☐ Fictitious Name	Limited Partnership	
	Reinstatement Trademark	
	Other	·····
· ·	Examiner's	Initials

CR2E031(7/97)

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILEL

2010 SEP 27 PM 4: 42

SECRETARY OF STATE: TALL'AHASSEE, FLORIDA

BITECH GROUP LLC

(A Florida Limited Limited Limited L	Liability Compar	ly)	
The Articles of Organization for this Limited Liability Company Florida document numberL10000083602	were filed on _	SEPTIEMBRE 03, 2010	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lish BITECH GROUP LLC	ollity company	here:	- Nakaranahar .
The new name must be distinguishable and end with the words "Lim"L.L.C."	ited Liability Co	mpany," the designation "LI	.C" or the abbreviation
Enter new principal offices address, if applicable:	1680 NW 82	ND AVENUE MIAMI, FL 3312	6
(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 or registered agent and/or the new registered office address here.		on our records, enter th	e name of the nev
Name of New Registered Agent:			
New Registered Office Address:		(Enter Florida street add	ress)
	(City)	, Florida	(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

Title	<u>Name</u>		Address	Type of Action
MGR	CARIDAD) GARCIA	15476 NW 77th Ct # 125 MIAMI LAKE, FI	Add
				X Remove
MGR	CARIDAD	GARCIA	1680 NW 82ND AVENUE MIAMI, FL 3312	Add Remove
				Add Remove
		- today,		Add Remove
				Add Remove
	-			Add Remove
D. If a	mending any othe	r information, enter	r change(s) here: (Anach odditional sheets, if n	ecessary.)
		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
				2010
Dated_	SEPTEMBER	O3	2010	2010 SEP 2.7. PRECARIASSI
		Signature of a	member or authorized representative of a member CARIDAD GARCIA	R 4: FZ
			Typed or printed name of signee	
			Page 2 of 2	D