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NOV 27 2012

**EXAMINER** 

## **COVER LETTER**

TO:

Registration Section **Division of Corporations** 

LE GROUP INDUSTRIES, 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:

BULL DING Downtown

LE GROUP INDUSTRIES, LLC

201 S BISCAYNE BLYD. # 1200

MIAMI, FLORIDA 33131-4316

City/State and Zip Code

info @legroupindustries.com

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

For further information concerning this matter, please call:

at (897) 748 706 T

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

LE GROUP 1	NOUSTRIES, LLC		
(Name of the Limited Liah	oility Company as it now appears on our records.) ida Limited Liability Company)		
The Articles of Organization for this Limited Liabili Florida document number L 10000 1251	ty Company were filed on DECEMBER 6, 201 and assigned		
This amendment is submitted to amend the followin	g: A Company of the c		
A. If amending name, enter the new name of the	limited liability company here:		
LE Group in	dustries, LLC.		
The new name must be distinguishable and end with the "L.L.C.".  Enter new principal offices address, if applicable	words "Limited Liability Company," the designation "LLC" or the abbreviation		
(Principal office address MUST BE A STREET A	ODRESS)		
Enter new mailing address, if applicable:	Andrew State of the Control of the C		
(Mailing address MAY BE A POST OFFICE BOX	2		
B. If amending the registered agent and/or registered agent and/or the new registered office	egistered office address on our records, enter the name of the new		
Name of New Registered Agent:			
New Registered Office Address:			
Enter Florida street address			
	, Florida		
	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.

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> PAUSS TOWER W Some as fifore Remove 凶 Update JESUS CUELEZ CAMPS some as corrent Remove 12 Update CACEPES JUAN M. Same as current Remove Monge IN Update Remove Add please call my 305 7442554
please call phone. 305 7442554

Thanks, LEGGUP Industries, LLC

Thanks, LEGGUP Industries, LLC

2015 Block of 3 Remove

sorn	other information, enter change(s) here: (Att	other members	
Min	of MGPA instead of	MGR only title	
Sy T	of MGPA instead of mistake. Please, up homk you	MARCH COMPANY	1997 C
.Dated :	nler 21st., 2012		
	Signature of a member or authorized re	一	
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	Andrew Committee		
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