## L11000015801

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## **COVER LETTER**

	Registration Se Division of Cor						
SHRIPA	ann	LUGAN GROUP LLC					
SUBJECT: Name of Limited Liability Company							
The encid	osed Articles of	Amendment and fee(s) are sub	omitted for filing.				
		ndence concerning this matter	· ·				
		CAROLINA SERRANO PINILLA					
		<del> </del>	Name of Person				
		LUGAN GROUP LLC					
			Firm/Company	<del></del>			
	1800 NORTH BAYSHORE DR UNIT 402						
			Address				
	MIAMI, FL 33132						
	City/State and Zip Code						
		SERRANOCARO2@GMA	IL.COM				
		E-mail address: (	to be used for future annual report noti	tication)			
For furthe	er information co	oncerning this matter, please c	ali:				
CAROLI	NA SERRANO		786 2712318				
Name of Person			e Telephone Number				
Enclosed	is a check for th	e following amount:					
□ <b>\$</b> 25.0	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		<u>Street Address:</u> Registration Sec	ction				
Division of Corporations			Division of Corporations				
P.O. Box 6327 Tallahassee, FL 32314			The Centre of Tallahassee 2415 N. Monroe Street, Suite 810				

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LUGAN GROUP LLC		2024. 1 Pil 5: 32
(Name of the Limite	d Liability Company as it now appears on our reco A Florida Limited Liability Company)	ords.)
The Articles of Organization for this Limited Lia Florida document number 1.11000015801		and assigned
This amendment is submitted to amend the follo	wing:	
A. If amending name, enter the new name of	the limited liability company here:	
The new name must be distinguishable and contain the wo	ords "Limited Liability Company," the designation "L	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applica	ble:	
(Principal office address MUST BE A STREET	ADDRESS)	
	<del></del>	
Enter new mailing address, if applicable:	<del></del>	
(Mailing address MAY BE A POST OFFICE B	<u> </u>	
B. If amending the registered agent and/or reagent and/or the new registered office address	gistered office address on our records, <u>ento</u> <u>here</u> :	er the name of the new registered
Name of New Registered Agent:	CAROLINA SERRANO	
New Registered Office Address:	1800 NORTH BAYSHORE DR UNIT 402	
	Enter Florida street addi	Y.S.S.

## 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 605, 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.

City

MIAMI

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

Title '	<u>Name</u>	Address	Type of Action
MGR	ANA M GUARACAO	30 NW 100TH TERRACE	□Add
		MIAMI SHORES, FL 33150	Remove
			🗏 Change
MGR	LUISA F GUARACAO	1800 NORTH BAY SHORE DR UNIT 402	
		MIANII FL 33132	≣Remove
			□Change
AMBR	CAROLINA SERRANO	1800 NORTH BAYSHORE DR UNIT 402	<b>≣</b> Add
		MIAMI FL 33132	□Remove
			□Change
<del></del>			□ Add
			□Remove
			□Change
			□ Add
			□Remove
			□Change
		<del></del>	□Add
			□Remove
			□ Change

\* \* \* \* \* \* D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed. Dated\_ULY 24 2024

Typed or printed name of signee

Signature of a member or authorized representative of a member

CAROLINA SERRANO