

11000062224

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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((H13000145332 3))



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To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : ACCOUNTANT & MANAGEMENT INC
Account Number : I20110000070
Phone : (305) 541-3980
Fax Number : (305) 541-7033

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

RECEIVED

13 JUL -2 PM 3:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
ALTEA GROUP, LLC

Certificate of Status	0
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Page Count	04
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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JUL 03 2013
D. BUTLER

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ALTEA GROUP, 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:

MOSES NAE
Name of Person
ACCOUNTANT & MANAGEMENT INC
Firm/Company
1549 NE 123RD ST
Address
NORTH MIAMI, FL 33161
City/State and Zip Code
INFO@TAXLEAF.COM
E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

MOSES NAE at (305 541-3980)
Name of Person 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

ALTEA GROUP, LLC

~~(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 05/26/2011 and assigned

Florida document number L11000062224

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TALLAHASSEE, FLORIDA

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 office address, if applicable:

(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 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:

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 below added or removed from our records:

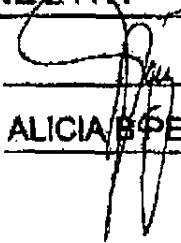
MGR = Manager
MGRM = Managing Member

Title	Name	Address	Type of Action
MGR	LANZAVECCHIA, HUMBERTO D	1549 NE 123 ST NORTH MIAMI, FL 33161	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	PEREZ, ALICIA B	1549 NE 123 ST NORTH MIAMI, FL 33161	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	GONZAGA HOLDING LIMITED	PALM GROVE HOUSE P.O. BOX 438 ROAD TOWN, TORTOLA, VG 1110	<input checked="" 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
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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FALLA ASSOCIATES, LLC
MIAMI

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

Dated JUNE 24TH 2013



Signature of a member or authorized representative of a member

ALICIA B. PEREZ

Typed or printed name of signer

ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED
DATE 07/13/2011 BY 60322
UCBAW/STP/STP

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