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## **COVER LETTER**

TO: Registration Section
Division of Corporations

<sub>subject:</sub> Elia 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:

Patricia Jemail-Harvalis

Name of Person

Elia Group LLC

Firm/Company

888 Biscayne Blvd, Ste 110

Address

Miami, FL 33132-1507

City/State and Zip Code

eliamiami888@gmail.com

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

For further information concerning this matter, please call:

**Dimitris Harvalis** 

**,,,786**\558-3542

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

Elia Group, LLC				
( <u>Name of the Limited Lial</u> (A Flor	bility Company as it now appears on our records.) rida Limited Liability Company)			
The Articles of Organization for this Limited Liabil		a	nd assign	ned
Florida document number L12000005290	·			
This amendment is submitted to amend the following	ng:			
A. If amending name, enter the new name of the	limited liability company here:			
The new name must be distinguishable and end with the "L.L.C."	e words "Limited Liability Company," the designation	"LLC" o	or the abl	previation
Enter new principal offices address, if applicable	**			
(Principal office address MUST BE A STREET A	DDRESS)			
		- 15.5 c	<u> </u>	
		5 ( ) j	<u>.</u>	
Enter new mailing address, if applicable:			2PR	i i
(Mailing address MAY BE A POST OFFICE BO)	N)		5	T-
		1,54.	72	\$ 1
		3.5	<del></del>	
B. If amending the registered agent and/or r		r the n	ante 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 o	street address		
_	, Florida			
	City	Zip	o 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>	Address	Type of Action
MGR	Dimitris Harvalis	888 Biscayne Blvd	✓ Add
		Ste 110	Remove
		Miami, FL 33132-1507	
MGRM	Patricia Jemail-Harvalis	888 Biscayne Blvd	Add
		Ste 110	Remove
		Miami, FL 33132-1507	
			Add
			Remove
			D Add
			Add Remove
			Add Remove

	ormation, enter change(s) here: (Attach additional sheets, if necessary.)				
Patricia Jema	Patricia Jemail-Harvalis changing title from MGR to MGRM				
Dated April 11	2013				
Dateu	River				
	Signature of a member or authorized representative of a member				
Patricia Jen	nail-Harvalis				
<u> </u>	Typed or printed name of signee				

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Filing Fee: \$25.00

2013 APR 16 PM 1:06