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COVER LETTER

Registration Section

P.O. Box 6327

Tallahassee, FL 32314

TO:

SUBJECT:	Name of Lir	nited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sul	omitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	RACHEL TORO			
		Name of Person		
	THE CANTOR GROUP I	LLC		
		Firm/Company		
	7328 SW 48 STREET SU	ITE B		~ ⊆
		Address		22 AI
	MIAMI, FL 33155			AUG 16
	DOMINGUEZ6932@AOL			- 32
For further information c	E-mail address: (oncerning this matter, please c	to be used for future annual report rall:	notification)	3: 32
RACHEL TORO		305 740-8087		
Name o	f Person	at () Area Code Day	time Telephone Number	-
Enclosed is a check for th	e following amount:			
S25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fe Certificate of St Certified Copy (additional copy is	atus &
Mailing Address Registration S		Street Address: Registration S		
Division of C	orporations	Division of C	orporations	

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

THE CANTOR 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 02/22/2012 and assigned Florida document number L12000026100 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 contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices 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 ___

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.

Cuv

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

<u>Title</u>	Name	Address	Type of Action
MGR	JONATHAN B. MOREAU	7328 SW 48 ST, SUITE B	= Add
		MIAMI, FL 3315	□Remove
			□Change
			□Remove
			□Change
			35 CR
			22 JUG 1 Genove PH
			日本 では、 GRangerys スタージェー
			□Add
			□Remove
			☐ Change
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