

OCT/27/2015 TUE 01:43 PM
10/27/2015

FAX NO.

001/004

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
BOSA GROUP LLC

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FAX No.

P. 002/004

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

BOSA 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 04/19/2012 and assigned
Florida document number L12000053272

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:

4466 W WHITE WATER AVE

(Principal office address MUST BE A STREET ADDRESS)

WESTON, FL 33332

Enter new mailing address, if applicable:

4466 W WHITE WATER AVE

(Mailing address MAY BE A POST OFFICE BOX)

WESTON, FL 33332

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:

CHANGE OF ADDRESS

New Registered Office Address:

4466 W WHITE WATER AVE

Enter Florida street address

WESTON

City:

Florida 33332MGR

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 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.


If Changing Registered Agent, Signature of New Registered Agent

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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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	SARA SALAZAR	4466 W WHITE WATER AVE	<input type="checkbox"/> Add
		WESTON, FL 33332	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGRM	FRANCISCO BORRERO	4466 W WHITE WATER AVE	<input type="checkbox"/> Add
		WESTON, FL 33332	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

OFFICE OF THE
CLERK OF THE
CITY OF WESTON
FLORIDA
OCT 27 8:32 AM

P. 004/004

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Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be used as the document's effective date on the Department of State's records.

Dated OCTOBER 23 2015

Typed or printed name of signer

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