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COVER LETTER

Registration Section
Division of Corporations

TO:

IMS Group	, LLC		
SUBJECT.	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	emitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Maria Hernandez		
		Name of Person	
	IMS Group, LLC		
		Firm/Company	
	433 Plaza Real #275		
		Address	_,
	Boca Raton, FL 33432		
		City/State and Zip Code	
	imsgroupweb@gmail.com	Name of Limited Liability Company endment and fee(s) are submitted for filing. Ince concerning this matter to the following: Maria Hernandez Name of Person IMS Group, LLC Firm/Company 433 Plaza Real #275 Address Boca Raton, FL 33432 City/State and Zip Code Insgroupweb@gmail.com E-mail address: (to be used for future annual report notification) erning this matter, please call: at (
	E-mail address: (to be used for future annual report notification)	
For further information c	oncerning this matter, please c	all:	
Maria Hernandez			
Name o	f Person	Area Code Daytime Telephone N	umber
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee		Certified Copy Ce (additional copy is enclosed) Cer	rtificate of Status &
Mailing Addres			
Registration S Division of C		<u> </u>	
P.O. Box 632			
Tallahassee, I		2415 N. Monroe Street, St	iite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

IMS Group, LLC						
(Name of the Limi	ted Liability Compa (A Florida Limited	any as it now appears on our re Liability Company)	cords.)			
The Articles of Organization for this Limited L	iability Company	were filed on 11/30/2012		and as	signed	
Florida document number L12000150062						
This amendment is submitted to amend the following	owing:					
A. If amending name, enter the new name of	f the limited liab	ility company here:				
The new name must be distinguishable and contain the v	words "Limited Liabi	lity Company," the designation "	LLC" or the abbrevi	iation "I	L.C."	
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		433 Plaza Real #275				
		Boca Raton, FL 33432				
					202	
				* ; ;	2020 JAH	
Enter new mailing address, if applicable:		433 Plaza Real #275			<u>∓</u> =	— : <u>;</u>
(Mailing address MAY BE A POST OFFICE	BOX)	Boca Raton, FL 33432		• •		. .:
5 to 10 to 1					 0.	-
B. If amending the registered agent and/or agent and/or the new registered office addre	registered office : ss here:	address on our records, <u>en</u>	iter the name of	the ne	w regi	stered
Name of New Registered Agent:	Maria Hernand	ez.				_
New Registered Office Address:	433 Plaza Real	#275				
•		Enter Florida street ad	ldress			
	Boca Raton		, Florida 33432			
		City	Z	lip 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

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>	Type of Action
MGR	Raimundo Dias	175 SW 7th Street, Suite 2011	
		Miami, FL 33130	Remove
			Change
MGR	Maria Hernandez	433 Plaza Real #275	■Add
		Boca Raton, FL 33432	□ Remove
			Change
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ffective date, if other than than effective date is listed, the date in this ocument's effective date on the	nust be specific an block does not	id cannot be prio meet the appli	r to date of filing o cable statutory fi	r more than 90 da ling requiremen	ys after filing.) P	ursuant to 605,0207 Il not be listed as
record specifies a delayed effect is filed.	tive date, but no	ot an effective t	ime, at 12:01 a.:	m. on the earlie	of: (b) The S	Oth day after the
ated		2020	·			
	Mari	a Her	nandes porized representa			
	C :		contract representati	TOTAL OF THE PARTY		
	Signature of a	i member or autr	iorized representa	VVC 01 a member		

Filing Fee: \$25.00