3/30/2020



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H20000096604 3)))



H200000966043ABC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : PANELL LAW GROUP, LLC

Account Number : I20130000088 Phone : (305)513-8606

Fax Number : (305)513-8605

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

eli@wpolaw.com Email Address:__

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN RAVELO GROUP USA HOLDINGS LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

Corporate Filing Menu

Help

O SIMMON

APR () 1 2020

2020-03-30 23:44:12 (GMT) (((H20000096604 3)))

COVER LETTER

	ration Section on of Corpora		•	•
	AVELO GRO	UP USA HOLDINGS LLC		
SUBJECT:	, and a second s	Name of Limit	ed Liability Company	
The enclosed A	articles of Ame	ndment and fee(s) are subn	nitted for tilling.	
Please return al	II corresponder	ice concerning this matter to	the following.	
		ELI PANIELL, ESQ., CPA,	CFP(R), LL-M	
	-		Name of Person	
		WERMUTH PANELL OR	FIZ, PLLC	
	-		Furn/Company	
8750 NW 36TH ST, SUITE 425				
Address				
		DORAL, FL 33178		
	·	LIGWPOLAW COM	City/State and Zip Code	
	_	E-mail address: (t	o be used for future annual report no	lification)
For further inf	ormation conc	erning this matter, please ca	il.	
ELI PANELL	" ESQ., CPA.	CFP(R), LL M	305 513-8606 at ()	
	Name of Pe	Son	Area Code Dayti	me Telephone Number
Enclosed is a	check for the f	Mowing amount		
≡ \$25.00 Fi	ling Fee	2 \$30.00 Filing Fee & Ceruficate of Status	☐ \$55,00 Filing Fee & Certified Copy radditional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Reg Div P.O	ing Address: istration Secusion of Cort. Box 6327 tablessee, FL	porations	Street Address: Registration S Division of C The Centre of 2415 N. Mon Tallahassee, 1	orporations Tallahassee roe Street, Suite 810

2020-03-30 23:44:12 (GMT)

(((H20000096604 3)))

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	SA HOLDINGS LLC		
(Name of the Limited Liability Company (A Florida Limited Lia	v as it now appears on our ability Company)	records.)	
The Articles of Organization for this Limited Liability Company w	vere filed on07/17/201	3	_ and assigned
Florida document number1.13006161008			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabil	ity company here:		
			. 20
The new name must be distinguishable and contain the words "Limited Liabilit			ration "L.B."
Enter new principal offices address, if applicable:			<u>်</u> ယ
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable:			2
(Mailing address MAY RE A POST OFFICE ROX)			
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records.	enter the name of	of the new registered
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida stree	tadáress	
		Florida	Zip Cook
	Ciry		Zip Cock
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p	pertormance of my au	nes, ana i am jai	Millen with cure

If Changing Registered Agent, Signature of New Registered Agent

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.

2020-03-30 23:44:12 (GMT) (((H20000096604 3)))

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person-being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

Title	Name	<u>Address</u>	Type of Action
MGR	ANTONIO MASSIMINI	8750 NW 36TH ST, SUITE 425	■Add
		DORAE, FL 33178	
			[]Change
			CRepagne 120 H
			Lichange 3 Add AH 10 :□Remive
			🗆 🗆 🗆 🗆 🗆 🗆 🗆 🗆 🗆 🗆 🗆 🗆 🗆
			☐ □Remove
			Change
			[]Add
			□Remove
			□Change
			☐ Remove

(((H20000096604 3)))

						
			· · · · · · · · · · · · · · · · · · ·			-
			······································			
						-
						-
						-
					<u></u> -	ىر.
				·	ــــــــــــــــــــــــــــــــــــــ	2020 MAR
						AR 3
<u></u>						
			-			AM 10:
					T. :	: 27
			·····			_
						_
						_
Note: litt	date, if other than the date reduce is listed, the date must be sp the date inscrited in this block d is effective date on the Departi	oes not meet the applicati	ne statutory tring	(optional e than 90 days after filin equirements, this dat) g.) Pursuant to 6 e will not be li	05.0207 (3) sted as the
cord is filed	secrities a delayed effective date				The 90th day at	ter the
Dated	MARCH 30	2020	- Jan	\		
		nune of a member or author	<i>y</i>			
		,J·	ORGE MASSIMI	NI .		
		Typed or printed	name of signee			