L17000110607

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SECRETARIO DA

TALLAHASSEEL FLORIDA



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 4, 2014

MONIEL ALMONZAR 21218 ST ANDREWS BLVD #755 BOCA RATON, FL 33433

SUBJECT: POLYGROUP INVESTMENT & HOLDINGS, LLC

Ref. Number: L13000110607

We have received your document for POLYGROUP INVESTMENT & HOLDINGS, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date must be specific and cannot be prior to the date of filing.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 514A00002527

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

www.sunbiz.org

COVER LETTER

TO: Registration S Division of Co		,	- Marie - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 19
SUBJECT:	Mame of Lim	estment & Holdl ited Liability Company	ings, LIC
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	
	Moriel	Almonzso	
		Name of Person	
	-		
		Firm/Company	
	21218 57	Androws Blu Address	14755
		Address	
	Boen K	aton, FC, 3	33 <i>433</i> _
		City/State and Zip Code	
	Momagor E-mail address: (to be used for future annual report notif	o. Com
For further information of	concerning this matter, please ca		(Callony)
Name o	a largas of Person	at (<u>561)</u> 922 3 Area Code Daytime	3953 (Seere fory)
Enclosed is a check for t	he following amount:		
□ \$25.00 Filing Fee	E \$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

jability Company as it now appears on our lorida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on _ Florida document number 4/3000110607 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 end with 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 City 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

If Changing Registered Agent, Signature of New Registered Agent

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 amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member Title Name Type of Action MGRM Mariel Almonzor 21218 St-Andrews Blv # Add

Bola Raton, FL, 33433 Remove MGIZ Levin Brody 3740 5 Deen Blv Add

Apt 409

Highloral Beach, FL 33487

Remove □ Add □ Remove □ Add □ Remove

D, I	amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
E. E	ffective date, if other than the date of filing: (optional) he effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after
	he date this document is filed by the Florida Department of State)
г	Pated Sowory 30th, 2014.
_	,
	Woull almonor
	Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member MARIEL ALMBAILAR
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

14 MAY 27 PH 3: 38
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