L17000 176462

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)
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COVER LETTER

TO: Registration Se Division of Cor			
MEGAPRO SUBJECT:	OP GROUP LLC		
Sobject.	Name of Lim	ited Liability Company	
	Amendment and fee(s) are sub andence concerning this matter	-	
	GEORGE S. SAVAGE, E	SQ.	
		Name of Person	
	THE SAVAGE LAW GR	OUP, P.A.	
		Firm/Company	
	8603 S. DIXIE HIGHWA	Y, SUITE 218	
		Address	
	MIAMI/FLORIDA 33143		
		City/State and Zip Code	
	OFFICE@SAVAGELAW.		
For further information of	E-mail address: (concerning this matter, please c	to be used for future annual report notifi	ication)
GEORGE S. SAVAGE	oncerning this matter, please c	305 577-0000	
Name o	f Person	at () Area Code Daytime	Telephone Number
Enclosed is a check for the	he following amount:		
\$25.00 Filing Fee	□ \$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)
MAII	INC ADDDESS.	CTDEET/COLIDII	ED ADDRESS.

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 OF

mited Liability Comp (A Florida Limited	any as it now appears on our records.) Liability Company)	
Liability Company	were filed on	and assigned
ollowing:		
of the limited liab	oility company here:	
e words "Limited Liabi	lity Company," the designation "LLC" of	or the abbreviation "L.L.C."
inter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		
	Miami Beach, Florida 33139	
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX)		
		Suite 202
	Miami Beach, Florida 33139	
		enter the name of the
1680 Meridian	Avenue, Suite 202	10 to 10
	Enter Florida street address	
Miami Beach	. Floric	da 33139 N
	Liability Company ollowing: e of the limited liab e words "Limited Liabi licable: EET ADDRESS) EBOX) ad/or registered of office address here Belkis Mirabal	e words "Limited Liability Company," the designation "LLC" of licable: 1680 Meridian Avenue Suite 202 Miami Beach, Florida 33139 1680 Meridian Avenue Suite 202 Miami Beach, Florida 33139 Id/or registered office address on our records, soffice address here: Belkis Mirabal 1680 Meridian Avenue, Suite 202

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

MGR = M AMBR = A	lanager Authorized Member		
<u> Fitle</u>	<u>Name</u>	Address	Type of Action
MGR	Gustavo Lanza		Add
			■ Remove
			☐ Change
MGR	AGMAGROUP LLC	16192 Coastal Highway	■ Add
		Lewes, Delaware 19958	□ Remove
			Remove
			Change
		 	□ Add
			Remove
			Change
			
			Remove
			Change
			□ Add
			☐ Remove

_□ Change

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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00