L13000172097

(R	equestor's Name)	
(A	ddress)	
(A	ddress)	
(C	city/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(B	Business Entity Name)	
(0	Ocument Number)	
Certified Copies	Certificates of	Status
Special Instructions to	o Filing Officer:	

Ü

Office Use Only



800254437998

12/13/13--01028--005 **25.00



A 12/13

CORPORATE ACCESS,

"When you need ACCESS to the world"

IŅC.

236 East 6th Avenue . Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066)

~ (850) 222-2666 or (800) 969-1666 . Fax (850) 222-1666

WALK IN

		PICK U	JP: 12/13 Glinda			
		CERTIFIED COPY				
	хх	РНОТОСОРУ				
		CUS				
	хх	FILING	LLC AMEND			
1.		MULCO GROL (CORPORATE NAME AND DOCUMI				
2.		(CORPORATE NAME AND DOCUM	CNT#)	•		
3.			*# g.४ १-		13 DEC	
4		(CORPORATE NAME AND DOCUMI	(NT #)		$\overline{\omega}$	TEC
4.		(CORPORATE NAME AND DOCUM	ENT#)		PH 1: 15	
5.		(CORPORATE NAME AND DOCUMI	ENT #)	×1'''	<u></u>	
6.						
	•	(CORPORATE NAME AND DOCUM	ENT #)			
SPE	CIAI	L INSTRUCTIONS:				
						

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MULCO 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 Comp	pany were filed on D	ecember 12, 20	13 and assigned	l
Florida document number L13000172097				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited	liability company h	ere:		
n/a				
The new name must be distinguishable and end with the words "L.L.C."	Limited Liability Com	pany," the designation "	LLC" or the abbrev	viation
Enter new principal offices address, if applicable:	n/a			
Principal office address MUST BE A STREET ADDRESS	<u></u>			ದ
			\$4	030
				<u> </u>
Enter new mailing address, if applicable:	n/a		<u> </u>	<u> </u>
Mailing address MAY BE A POST OFFICE BOX)				***
				-
B. If amending the registered agent and/or registered registered agent and/or the new registered office address		our records, enter	the name of the	-
Name of New Registered Agent: n/a				
New Registered Office Address:				
	E	Enter Florida street add	dress	
		, Florida		
	City		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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records: MGR = Manager MGRM = Managing Member Type of Action <u>Address</u> <u>Title</u> <u>Name</u> 20189 NE 16 PLACE **BRUNO BLOCH** MGR NMB, FL 33179 Remove

). If amending	any other information, enter change(s) here: (Attach additional sheets, if necessary.)
-	
ated DEC	EMBER 13 /2013
	Jestie alant 20
<u></u>	Signature of a member or authorized representative of a member
LE	ESLIE ALAN ROZENCWAIG, ESQ.
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00