

L14000112201

05/12/15 08:31 AM Jelen Accounting Services Inc 305-591-9167 p.01
DIVISION OF CORPORATIONS

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : JELEN ACCOUNTING SERVICES, INC
Account Number : 120120000052
Phone : (305) 591-9180
Fax Number : (305) 591-9167

FILED
2015 MAY 12 PM 12:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Email Address: jelenaaccountingservices@gmail.com.

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
HG INTERGROUP LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

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15 MAY 12 AM 10:00
BUREAU OF COMMERCIAL
INFORMATION SERVICES

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EXAMINER
MAY 13 2015

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Corporate Filing Menu

Help

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

FILED
2015 MAY 12 PM 12:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

HG INTERGROUP, 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 Company were filed on 7/16/14 and assigned Florida document number L14000112201

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 contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

8181 NW 36 STREET SUITE 13AB

(Principal office address MUST BE A STREET ADDRESS)

DORAL, FL 33166

Enter new mailing address, if applicable:

8181 NW 36 STREET SUITE 13AB

(Mailing address MAY BE A POST OFFICE BOX)

DORAL, FL 33166

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:

JELLEN ACCOUNTING SERVICES, INC.

New Registered Office Address:

8181 NW 36 STREET SUITE 13AB

Enter Florida street address

DORAL

City

Florida 33166

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 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>	<u>Type of Action</u>
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CLERK OF DISTRICT COURT
JELLEN ACCOUNTING SERVICES INC.

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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FALLA RICHIE, FLORIDA

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated

5/4

15.

Signature of a member or authorized representative of a member

Humberto Gomez Vilano

Typed or printed name of signer