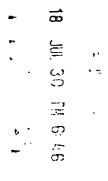
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(Requesto	or's Name)
(Address)	
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COVER LETTER

	egistration Sec livision of Corp			
end irea	. ANANIA G	ROUP, LLC		
SUBJECT	:	Nume of Lin	nited Liability Company	,
The enclos	ed Articles of A	amendment and fee(s) are sub	omitted for filing.	
Please retu	rn all correspon	dence concerning this matter	to the following:	
		ESMELDA V. MARTINE	ΞZ	
			Name of Person	
		ANANIA GROUP, LLC		
			Firm/Company	
		3857 GUILDFORD CT		
			Address	
		ORLANDO, FL 32817		
		1	City/State and Zip Code	
		martinezbelinda2011@gma		
Com Comboni	·	i	to be used for future annual report no	tilication)
ror turtner	intormation coi	ncerning this matter, please c	aii:	
ESMELDA	A V. MARTINE	EZ	407 947-1204 at ()	
	Name of I	Person		me Telephone Number
Enclosed is	s a check for the	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)
	Registrat	SG ADDRESS: ion Section offCorporations	STREET/COUF Registration Sect Division of Corp Clifton Building	
		see, FL 32314	2661 Executive C Tallahassee, FL 3	

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

ANANIA GROUP, LLC			
(Name of the Lin	nited Liability C	Company as it now appears on our records.) nited Liability Company)	
	(W Florida Cit	mico Daointy Company)	- · · · · · · · · · · · · · · · · · · ·
The Articles of Organization for this Limited	Liability Com	many were filed on 07/14/2018	and assigned
l l	ismonity com	pany were fried (iii <u></u>	and usigned .
Florida document number 1.15000014626	·		
This amendment is submitted to amend the fo	ollowing		့ တ
			0.16
A. If amending name, enter the new name	of the limited	l liability company here:	- 0
N/A			
The new name must be distinguishable and contain the	words "Limited	Liability Company," the designation "LLC" of	or the abbreviation "L.L.C."
		N/A	
Enter new principal offices address, if appl	licable:	13/23	
(Principal office address MUST BE A STRE	<u>EET ADDRES</u>	<u> </u>	
,			
!			
Farmer in the state of the stat		N/A	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE	<u>E BOX)</u>		
}			
B. If amending the registered agent an	d/or registere	ed office address on our records,	enter the name of the ne
registered agent and/or the new registered			
Name of New Registered Agent	N/A		
Name of New Registered Agent:		· · · · · · · · · · · · · · · · · · ·	
Name of New Registered Agent: New Registered Office Address:	N/A		
		Enter Florida street address	
		Enter Florida street address . Flor i	ida

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

r removed from our records: IGR = Manager MBR = Authorized Member				
<u>itle</u>	<u>Name</u>	Address	Type of Action	
GR	KATE A. URIAS - MARTINEZ	3857 GUILDFORD CT	■ Add	
		ORLANDO, FL 32817	□ Remove	
			□ Change	
			Add	
			☐ Remove	
			Change	
		 	Add	
			□ Remove	
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			☐ Remove	
			Change	

lf am	ending any othe	information, enter change(s) here: (Attach additional sheets, if	necessary.)	
	N/A			
				
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			<u></u>	
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•				
				
ffect	ive date, if other	than the date of filing: (o the date must be specific and cannot be prior to date of filing or more than 90 days a	ptional)	605 030
ote:	If the date inserted	in this block does not meet the applicable statutory filing requirements,	this date will no	ant to 605.020 of be listed a
ocun	nent's effective dat	e on the Department of State's records.		
e re The	cord specifies a 90th day after	delayed effective date, but not an effective time, at 12:0 the record is filed.	11 a.m. on th	e earlier o
	1 .			
ated	Llulio	142018.		
		$\overline{\overline{}}$	3 V	8
		And a	·	<u>'=</u>
		Signature of a member or authorized representative of a member	٠	ت = <u></u> دی
	ESMELDA V	. MARTINEZ	•	30
		Typed or printed name of signee	_	
			- • .	တဲ့
		Page 3 of 3	- · .	94.9