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(Business Entity Name)
(Document Number)
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TO: Registration Section Division of Corporations

Pacifico Sur Group, LLC

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SUBJECT:

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Francisco Baeza

Name of Person

Pacifico Sur Group, LLC

Firm/Company

20900 NE 30th Ave: Suite 200-12

Address

Aventura, FL 33180

City/State and Zip Code

francisco@chileanfisheries.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Francisco Baeza

Name of Person

Enclosed is 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)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2664 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF FILED

Pacifico Sur Group, LLC	
(<u>Name of the Limited Liability Compar</u> (A Florida Limited I.	inability Company)
The Articles of Organization for this Limited Liability Company v Florida document number <u>L15000031127</u>	SECRETARY OF STATE were filed on <u>02/19/2005LAHASSEE.FLORIDA</u> and assigned
This amendment is submitted to amend the following:	
A. If amending name, <u>enter the new name of the limited liabil</u>	lity company here:
The new name must be distinguishable and contain the words "Limited Liabili	ty 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 off registered agent and/or the new registered office address here	
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address

_____, Florida _

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.

City

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

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<u>Title</u>	<u>Name</u> CHFG Holdings, LLC	<u>Address</u> 20900 NE 30TH AVE	Type of Action
MGR			Add
		Suite 200-12	E Remove
		Aventura, FL 33180	Change
MGR	Francisco Baeza	20900 NE 30TH AVE	
			🖬 Add
			Remove
		Aventura, FL 33180	Change
			🖸 Add
			C Remove
			Change
·			🖸 Add
			Remove
			Change
			🗖 Add
			C Remove
			Change
			🗖 Add
			Remove
			Change

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

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	March 7, 2019
(If an effe <u>Note:</u> I	(optional) ective 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)(I If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ent's effective date on the Department of State's records.
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated _	March 7 2019
Dated_	
	Signiture of a memory or authorized representative of a member
	Francisco Baeza
	Typed or printed name of signee
	ryped or printed name of signee

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Filing Fee: \$25.00