

L15000040146

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

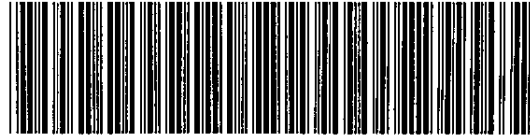
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200274578192

07/08/15--01020--007 **30.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
15 JUL -8 PM 1:36
TALLAHASSEE, FLORIDA

JUL 09 2015

8 MASON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Sonarra Group LLC
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:

Sharon Segarra
Name of Person
Sonarra Group LLC
Firm/Company
114 Bieder Ave.
Address
Sanford FL 32773
City/State and Zip Code
sharon-segarra@yahoo.com
E-mail address: (to be used for future annual report notification)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA
15 JUL - 8 PM 1:36

For further information concerning this matter, please call:

Sharon Segarra at (321) 578-7070
Name of Person Area Code Daytime Telephone Number

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
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Sonarra 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 Company were filed on March 4, 2015 and assigned
Florida document number L15000040146.

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 end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

114 Bieder Ave.
Sanford FL 32773

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

114 Bieder Ave.
Sanford FL 32773

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:

New Registered Office Address:

Enter Florida street address

Florida

City

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

Thereby 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

Page 1 of 3

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
JUL - 8 PM 1:36
TALLAHASSEE, FLORIDA

MGR = Manager
AMBR = Authorized Member

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
15 JUL -88 PM 1:36
Remove
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

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

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated July 6th 2015

Sharon Segarra

Signature of a member or authorized representative of a member

Sharon Segarra

Typed or printed name of signer

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA
15 JUL -8 PM 1:36