

(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL
(Address) (City/State/Zip/Phone #)
(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



700356553427

12/18/20--01002--009 **80.00

RECEIVE:

2020 DEC 15 AH 8: 03

DEC 1 - SARB

(850) 524-5437	
(850) 524-6243	
	(OFFICE USE ONLY)
Business Name & Document Nu	(OFFICE USE ONLY) mber, (if known):
1 DUCATTI C LLC	(1500004022
1. BUGATTI Group, LLC Name	L15000084823 Document Number (if known)
x Walk in	Will wait
X Certified Copy of the Article	s of Organization
X Certificate of Status	3 Of Organization
NEW FILINGS	<u>AMENDMENTS</u>
Profit	X_ Amendment
Not for Profit	Resignation of R.A. Officer/Director
Limited Liability	Change of Registered Agent
Domestication	Dissolution/Withdrawal
INC	Conversion
OTHER	Merger
OTHER FILINGS	REGISTRATION/QUALIFICATIONS
Annual Report	Foreign
•	Limited Partnership
Fictitious Name	Reinstatement
_ Statement of Authority	
	Trademark
APOSTIL ()COUNTRY	Other
	EXAMINER'S INITIALS:

FLORIDA CAPITAL COURIER SERVICES, INC

2330 CLARE DRIVE

TALLAHASSEE, FL 32309

COVER LETTER

TO: Registration S Division of Co			
Bugatti Gr			
SUBJECT:	Name of Lin	sted Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	omitted for filing	
	ondence concerning this matter		
	Jennifer Deaza		
		Name of Person	
		Firm/Company	
	805 N. Andrews Ave.		
		Address	
	Fort Lauderdale, FL 3331.		
	lotus 10@me.com	City/State and Zip Code	
	-	to be used for future annual report notif	ication)
For further information of	concerning this matter, please c	all:	
Richard E. Douglas		954 618-1005 ut ()	
Name o	of Person	Area Code Daytime	e Felephone Number
Enclosed is a check for t	he following amount:		
☐ \$25 00 Filing Fee	S30.00 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)
<u>Mailing Addre</u> Registration		Street Address: Registration Sec	Stion
Division of C		Division of Corp	porations
P.O. Box 633		The Centre of T	allahassee Street Suite 810

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Bugatti Group, LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number https://liability-company-15000084823	were filed on May 13, 2015	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liah	ility company here:	
		8
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the a	obreviation "L.L.G." - G
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:	805 N. Andrews Ave.	obreviation *L.L.G.* G. DEC 15 Al. 8: 03
(Mailing address MAY BE A POST OFFICE BOX)	Fort Landerdale, FL 33311	
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	iddress on our records, <u>enter the nan</u>	ne of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
rew reggieren omzerioaks.	Enter Florula street address	
	, Florida	
	Cıņ	Zsp Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agre- provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am provided for in Chapter 605, F.S. Or,	familiar with and if this document is

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>	Address	Type of Action
MGR	Jennifer Deaza	805 N, Andrews Ave.	∰Add
		Fort Lauderdale, FL 33311	[]Remove
			☐ Change
MGR	Derrick Joseph Hinnendael	2680 Riviera Ct	bbb.□
		Weston, FL 33332	Remove
MGR	Yuval Hadaya	1004 Bayley Ct	
		Bridgewater, NJ 08807	■Remove
			□Add
			□Remove
			□ Change
			□Add
			□Remove
			☐ Change
			DAdd
		•	□Remove

							-			 -
										
			<u>-</u> _			 -				
										
_		·								
										
								-		
										
					-					
ctive o	late, if other i e date is listed, th	than the date	of filing	:	in to date o	(Glung as m		(option:	d)	.06.0303
<u>e:</u> II th	e date inserted	in this block d	oes not m	ect the app	licable stat	មេខាស្តី មួយ នេះ រូវប្រវត្តិ	requiremer	ys aner mi its, this da	ng) rumuant: ite will not be	e listed as
ıment`	s effective date	on the Departi	nent of St	ale's recon	ds					
ord spe filed	cifies a delaye	d effective date	, but not a	an effective	time, at 1	2:01 a.m. o	a the earlier	of: (b)	The 90th day	after the
mee										
Dec	ember 10			2020						
			<u> </u>		<u> </u>	4				
				_	ÍΛ	//				
:u			\ }	PA	- 1/1/	<u>/</u>				
eu		Signa	inte offa to	ember or au	thorized rep	resentative	of a member			_

Filing Fee: \$25.00