L15000089703

(Re	equestor's Name)	
(Ad	ldress)	
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PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	
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COVER LETTER

TO:	Registration So Division of Co			-
SUBJ		GROUP LLC		
SUDJ.	EC1:	Name of Lin	nited Liability Company	
The er	nclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please	return all correspo	ondence concerning this matter	to the following:	
		MANUEL PINAZO		
			Name of Person	
		1 SAVVY GROUP LLC		
	·		Firm/Company	
			Address	
			City/State and Zip Code	
		E-mail address: (to be used for future annual report notif	ication)
For fur	ther information c	oncerning this matter, please ca	all:	
MANI	UEL PINAZO		305 979-1779 at ()	
	Name o	f Person		Telephone Number
Enclos	ed is a check for th	ne following amount:		
■ \$2.	5.00 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

. 1 SAVVY GROUP LLC					
(Name of the Lim	ited Liability Comps (A Florida Limited	any as it now appears on our rec Liability Company)	ords.)		
The Articles of Organization for this Limited 1	Liability Company	were filed on May 20th 2015	and assigned		
Florida document number L15000089703	·				
This amendment is submitted to amend the fol	lowing:				
A. If amending name, enter the new name	of the limited liab	oility company here:			
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation "L	LC" or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:		10726 NW 58th Street	- mr		
(Principal office address MUST BE A STREET ADDRESS)		Doral, FL 33178	<u> </u>		
			AUG HA		
			385 4-		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		10726 NW 58th Street	THE PROPERTY.		
		Doral, FL 33178	23 V2 (2)		
			20 89 00 89		
B. If amending the registered agent and registered agent and/or the new registered of			rds, enter the name of the		
Name of New Registered Agent:	MANUEL PIN	AZO			
New Registered Office Address:	10726 NW 58tl				
		Enter Florida street address			
	Doral		Florida 33178		
		City	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>	Address	Type of Action
	HG International Group Corp	1430 Tunis Street	
		Coral Gables, FL 33134	■ Remove
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fective date, if other than the d	late of filing:		(or	otional)		
n effective date is listed, the date must l	be specific and cannot be prior t		r more than 90 days at	ter filing.) Pu		
ete: If the date inserted in this bloc cument's effective date on the Dep		bic statutory ii	ling requirements,	nis date wi	l not b	e iistea
record specifies a delayed The 90th day after the reco	effective date, but not rd is filed.	an effective	e time, at 12:0:	l a.m. on	the e	arlier
August 1st	2016					
	//	///				
	ignature of a member of author	<i>////</i>				

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Filing Fee: \$25.00