

L15000151843

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(Address)

(Address)

(City/State/Zip/Phone #)

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DIVISION OF CORPORATE
15 NOV 18 PM 12:00
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TO ACKNOWLEDGE
SUFFICIENCY OF FILING

15 NOV 18 PM 12:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER
NOV 18 2015

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: GRUPO CATARINO, 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:

JESSE J. LO RE

Name of Person

GRUPO CATARINO, LLC

Firm/Company

6460 VIA BENITA

Address

BOCA RATON, FL 33433

City/State and Zip Code

JESSE.LORE@GRUPOCATARINO.COM

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

For further information concerning this matter, please call:

JESSE J. LO RE

561 699-9160

at ()
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|---|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input checked="" type="checkbox"/> \$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**

GRUPO CATARINO, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

15 NOV 18 PM 12:03

SECRET
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 9/04/2015 and assigned
Florida document number L15000151843.

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 contain the words "Limited Liability 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 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:

THINK WISDOM PARTNERSHIP, INC.

New Registered Office Address:

6460 VIA BENITA

Enter Florida street address

BOCA RATON

City

, Florida 33433

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>	<u>Address</u>	<u>Type of Action</u>
MGR	Think Wisdom Partnership, Inc.	ATTN: JESSE J. LO RE	<input checked="" type="checkbox"/> Add
		6460 VIA BENITA	<input type="checkbox"/> Remove
		BOCA RATON, FL 33433	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

STAFFING
FALL 2013
10/1/13
CO
11:12:03
SUN
10/1/13

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

I HAVE ALSO ATTACHED A CHECK FOR \$20 TO HAVE THE UPDATED LLC DOCUMENT AND
CERTIFICATE OF STATUS APOSTILLED.

15 OCT 18 PM 12:05
SECRETARY OF REVENUE
TREASURY
APR 18 2018
FILED

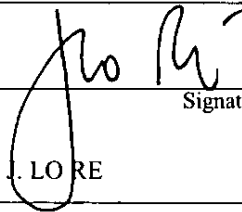
E. Effective date, if other than the date of filing: _____ **(optional)**

(If an effective 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)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(b) The 90th day after the record is filed.

Dated OCTOBER 31, 2015



Signature of a member or authorized representative of a member

JESSE J. LORE

Typed or printed name of signee