# LISCOO172719

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SECRETARY OF STATE
SECRETARY SEEF, FLORIDA

D. SCOTT DEC 21 2016

# **COVER LETTER**

TO:	Registration Se Division of Cor				
SUDIE		DE GROUP, LLC			
SUBJE	UI:	Name of Lim	ited Liability Company		
The encl	losed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please re	eturn all correspo	ndence concerning this matter	to the following:		
		LEONARDO CAMERO			
			Name of Person		
		CAMERO & COMPANY			
	•		Firm/Company		
•		200 SOUTH BISCAYNE	BLVD 2790		
	· · · · · · · · · · · · · · · · · · ·	MIAMI, FL/33131	Address		
		MARTO2525@HOTMAIL	City/State and Zip Code		TALL SECTION
		E-mail address: (	to be used for future annual report notific	ation)	望り二
For furth	her information c	oncerning this matter, please c	all:		經濟 19
LEONA	ARDO CAMERO	1	305 7149488 at ( )		ESS P
	Name o	f Person		Telephone Number	. 28
Enclose	d is a check for th	ne following amount:			
<b>□</b> \$25	.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	e of Status &

### MAILING ADDRESS:

# 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

LATTITUDE GROUP, LLC		
(Name of the Lim	ited Liability Company as it now appears on our (A Florida Limited Liability Company)	records.)
The Articles of Organization for this Limited I	Liability Company were filed on 10/09/2015	and assigned
Florida document number L15000172719		
This amendment is submitted to amend the fol	lowing:	
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	n "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	
(Principal office address MUST BE A STRE	ET ADDRESS)	
	-	
Enter new mailing address, if applicable:	<del></del>	
(Mailing address MAY BE A POST OFFICE	<u> </u>	
		<u> </u>
		ALCO D
B. If amending the registered agent and	d/or registered office address on our re	ecords, enter the name of the nev
registered agent and/or the new registered of	office address here:	<b>変要 る m</b>
Name of New Registered Agent:	CAMERO & COMPANY, P.A.	70
New Registered Office Address:	200 SOUTH BISCAYNE BLVD 2790	0.75
•	Enter Florida street	address
	MIAMI	, Florida <sup>33131</sup>
•	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>	Name	Address	Type of Action
MGRM	CLTTI, LLC	795 BAYSIDE LN	Add
		WESTON, FL	Remove
		33326, US	Change
MGRM	LEGACY PEAK, LLC	795 BAYSIDE LN	
•		WESTON, FL	■ Remove
<i>:</i>		33326, US	Change
MGR	DIEGO M CARLETTI MITCHELL	9273 SW 172ND AV	<b>□</b> Add
		MIAMI, FL	Remove
		33196, US	☐ Change
AMBR	JOSE R CARLETTI MITCHELL	9273 SW 172 ND AV	Add
	: · · ·	MIAMI, FL	□ Remove
		33196, US	□ Change
AMBR	IMPACT MANAGEMENT 795, LLC	795 BAYSIDE LN	Add
		WESTON, FL	. □ Remove
		33326, US	SECTION F
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Filing Fee: \$25.00