# (16000005871

(Re	equestor's Name)	<del> </del>
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	(Address)  (Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Copies Certificates of Status	
(Bu	ısiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	(Address)  (Address)  (City/State/Zip/Phone #)  JP	
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# **COVER LETTER**

Division of Corpor	rations						
SUBJECT:	Trivago Group	LLC					
ЗОВДЕСТ:	Name of Limit	ed Liability Company					
The enclosed Articles of Am	nendment and fee(s) are subn	nitted for filing.					
Please return all corresponde	ence concerning this matter t	o the following:					
		Eduardo Ayala					
	Name of Person						
Ayala Law PA							
		Firm/Company					
1390 Brickell Avenue, Suite 335							
Address							
	Miami, FL 33131						
City/State and Zip Code							
	lawayala@gmail.com						
	E-mail address: (ti	o be used for future annual report notificat	ion)				
For further information cond	cerning this matter, please ca	11:					
Eduaro Ayala		305 5702208					
Name of Person		at () Area Code Daytime Te	lephone 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)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)				

## MAILING ADDRESS:

TO:

**Registration Section** 

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

Triage Group LLC				
(Name of the Limi	ted Liability Company as it now appe (A Florida Limited Liability Company	ars on our records.)		•
The Articles of Organization for this Limited L Florida document number L16000005871	.iability Company were filed on	02/04/2016	and a	ssigned
This amendment is submitted to amend the foll	lowing:			
A. If amending name, enter the new name of	of the limited liability company	<u>here</u> :		
The new name must be distinguishable and contain the v	words "Limited Liability Company," the	designation "LLC" or the a	bbreviation `	L.L.C.
Enter new principal offices address, if applie	cable:			
(Principal office address MUST BE A STREE	ET ADDRESS)			
Enter new mailing address, if applicable:			: .	<b>m</b>
			Ωή.	Φ :
(Mailing address MAY BE A POST OFFICE	<u></u>			P 1:
			92	က်
B. If amending the registered agent and registered agent and/or the new registered of		on our records, <u>enter</u>	the nam	es of the nev
Name of New Registered Agent:	AYALA LAW PA			
New Registered Office Address:	1390 Brickell Avenue, Suite 3	335		
Tion itogistered Office Hadieod,	Enter F	lorida street address		
	Miami	, Florida	33131	
	City	, 1 101	Zip Coc	le

### 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>	Type of Action
MGR	Nilda Acosta	1390 Brickell Avenue Suite 335, M	Add
			□ Remove
			□ Change
AMBR	Moreira Lazaro	7480 Bird Road Suite 820, Miami I	Add
			■ Remove
			Change
AMBR	Lorites Jesus	7840 Bird Road Suite 820, Miami I	Add
		·	■ Remove
			Change
AMBR	Bonvecchio Alex	7480Bird Road820, Miami FL 331:	
			Remove  Change  Add  Add  Add  Add  Add  Add  Add  A
			☐ Remove ☐ Change ☐ Add
			□ Remove
			☐ Change

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If an effective on the control of th	te, if other than the datate is listed, the date must be date inserted in this block offective date on the Department.	e specific and ca k does not me	annot be prior te et the applica	o date of filing o	or more than 90 da	(optional) lys after filing. nts, this date	) Pursuant	to 605.0 e listec	)20 1 a
	specifies a delayed e day after the recor		te, but not	an effectiv	e time, at 12	2:01 a.m.	on the e	arlie	r
	04/02		2016	<b>4</b> ·					
Dated				λ					

Page 3 of 3

Filing Fee: \$25.00