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2017 JUN -5 PM 2: 17
SECRETARY OF STATE

K. SALY JUN - 6 2017

COVER LETTER

TO:	Registration Se Division of Cor			
CUBIE	Coeptis Gro			
SUBJE	СТ:		ited Liability Company	
		Amendment and fee(s) are sub	-	
i icase i	etarii aii correspo		to the following.	
		Severine Gianese-Pittman,	Esq.	
			Name of Person	
		Gianese-Pittman, P.A.		,
			Firm/Company	
		100 N. Biscayne Blvd., Su	ite 3070	
			Address	
		Miami, FL 33132		
			City/State and Zip Code	
		sgianese@sgpittman.com E-mail address: (to be used for future annual report notifi	cation)
For furt	17.5			.,
Severin	e Gianese-Pittma	n, Esq.	305 722-5986	
	Name o	f Person	Area Code Daytime	Telephone Number
Enclose	d is a check for th	ne following amount:		
\$25	.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

2017 JUN-5 PH 2: 17
SECRETARY OF STATE
ALLAHASSEE. FLORIDA

Coeptis Group, LLC

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

(A Florida Limited Liability Company)

Name of New Registered Agent: New Registered Office Address:	Enter Florida street addres	
Name of New Registered Agent:	Enter Florida street addres.	
Name of New Registered Agent:	·	
	`	
Asserted agent and/or the new registered on		
egistered agent and/or the new registered off	O Company	,
s. If amending the registered agent and/c	or registered office address on our records	. enter the name of the
Mailing address MAY BE A POST OFFICE E		-
nter new mailing address, if applicable:		
		
Principal office address MUST BE A STREET	T ADDRESS)	
nter new principal offices address, if applica	able:	
he new name must be distinguishable and contain the wo	ords "Limited Liability Company," the designation "LLC	" or the abbreviation "L.L.C."
. If amending name, enter the new name of	the limited liability company here:	
his amendment is submitted to amend the follo	owing:	
lorida document number L10000002172		and assigned
lorida document number L16000062192	ability Company were filed on 03/29/2016	

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
MGRM	Elsa Boutaric	5151 Collins Avenue, PH-G	≣ Add
		Miami Beach, FL 33140	Remove
			☐ Change
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