LIL 0000 84466

(Requestor's Name)	
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PICK-UP WAIT MAIL	
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(Document Number)	_
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COVER LETTER

TO: Registration Se Division of Con			
SUBJECT: Promerca	Insurance Group, LLC		
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	\
Please return all correspo	ondence concerning this matter	to the following:	
	Saymis Del Rosario Veg		
		Name of Person	
	Promerca Insurance Gro	oup, LLC	<u> </u>
		Firm/Company	
	1750 NW 107th Ave Ste	NM-6	
		Address	
	Doral, FL 33172		
		City/State and Zip Code	
	INFO@PROMERCAINSURA		· .
	ti-man address: (to be used for future annual report notif	(cation)
For further information c	oncerning this matter, please co	all;	ı
Saymis Del Rosario Vega	a Leyva	at (<u>786</u>) <u>797-7347</u>	
Name o	f Person	Area Code Daytime	e Telephone Number
Enclosed is a check for the	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

	Promerca Insurance Grou	ı <u>p,</u> LLC			
	(<u>Name of the Limi</u>	ted Liability Compa (A Florida Limited I	ny as it now appears on a Liability Company)	ur records,)	
he Articles	of Organization for this Limited L	iability Company	were filed on 10/27/	2016	and assigned
lorida doci	ıment number <u>L16000084466</u>				
nis amend	ment is submitted to amend the foll	owing:			1
. If amen	ding name, <u>enter the new name o</u>	f the limited liab	ility company here:		
ne new name	must be distinguishable and contain the v	words "Limited Liabil	ity Company," the designa	tion "LLC" or the abb	previation "L.L.C."
nter new	principal offices address, if applic	able:			· · · · · · · · · · · · · · · · · · ·
<u>Principal office address MUST BE A STREET ADDRI</u>		ET ADDRESS)	1750 NW 107TH AVE	Ste NM-8	<u>'</u>
			Doral, FL 33172		
					, 1
nter new i	mailing address, if applicable:				
failing ad	dress MAY BE A POST OFFICE	BOX)	1750 NW 107TH AVE	Ste NM-8	7-6
			Doral, FL 33172		
					4
lf ame	nding the registered agent and gent and/or the new registered or	or registered of	fice address on our	records, enter 1	the name of the
gistereu a	gent and/or the new registered of	ince address here	<u>.</u>		<u> </u>
<u>Na</u>	me of New Registered Agent:	Saymis Del Rosa	ario Vega Leyva	·	£9 -
Ne	w Registered Office Address:	1750 NW 107TI	H AVE Ste NM-8		Ì
			Enter Florida str	eet address	
		Doral		, Florida33	
			City		Zip C o de

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 = N AMBR = A	Nanager Authorized Member				
<u>Title</u>	Name	Address	Type of Action		
MGR	RICHARD GUERRERO		□ A₫d		
		11145 SW 6 ST APT 101 PEMBROKE PINE, FL 33025	⊠ Remove		
			Change		
	-				
			□ Remove		
			Change		
			Remove		
			Change		
			Add		
			Remove		
			Change		
.					
			🗅 Remove		
			Change		
			□ A d d		
		· · · · · · · · · · · · · · · · · · ·	□ Remove		
			□ Change		

D. If ame	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
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-		223
(If an eff Note:	ive date, if other than the date of filing:	
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the 90th day after the record is filed.	e earlier of:
Dated	October 27	Ļ
	Burs.	
	Signature of a member or authorized representative of a member	
	Saymis Del Rosario Vega Leyva	
	Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00