(Address) (Address) (City/State/Zip/Phone #)	300315312513
(City/State/Zip/Phone #)	
	07/05/1801018021 **60.0
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	• 18
Special Instructions to Filing Officer:	یسی ۳۰ ۲۱ ۲۱
Special Instructions to Filing Officer:	

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· · ·		COVER LETTER	
TO: Registration S Division of Co			
NV2A Gro			
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
	ondence concerning this matter		
	Sianna J. Rodriguez		
		Name of Person	
	NV2A Group, LLC		
		Firm/Company	
	9100 S Dadeland Blvd. Su	lite 600	
	<u> </u>	Address	
	Miami, FL 33156		
		City/State and Zip Code	
	sjrodriguez@nv2agroup.co E-mail address: (on (to be used for future annual report notification)	
For further information of	concerning this matter, please c	all:	
		786 233.5060 ext 5047	
Sianna Rodriguez		at (
	of Person	at () Area Code Daytime Teleph	one Number
Name o			one Number
		Area Code Daytime Teleph	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Name of S25.00 Filing Fee MAIL Regist Divisio	he following amount: □ \$30.00 Filing Fee &	Area Code Daytime Teleph	\$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

NV2A Group, LLC

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

The Articles of Organization for this Limited Liability Company were filed on ______ and assigned Florida document number L16000102429 ______.

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 "LLC"

Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	œ
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	- I <u>)</u> ;
	<u>م</u>

B. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new</u> registered agent and/or the new registered office address here:

Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street	address
_	City	_, FloridaZip 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, <u>enter the title, name, and address of each person</u> being added <u>or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

,

<u>Title</u>	Name	Address	Type of Action
 _	LAC Investments . LLC	9100 S. Dadeland Blvd Suite 600	🖬 Add
		Miami, FL 33156	Remove
		·	Change
			Add
			Remove
			Change
			🛛 Add
		Remove	
		□ Change	
			Add
		<u> </u>	Remove
			Change
	·····		Add
			Remove
		·	Change
			Add
			Remove
		······································	Change

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

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*

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 _	June 25 2010.	
	$\langle \rangle$	
	Signature of a member or authorized representative of a member	-
	Agustín R. Arellano Jr	
	Typed or printed name of signee	-