1160001377164

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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D. SCOTT SEP 2 8 2017



September 20, 2017

GABRIELA SETRAKIAN 1241 CANARY ISLAND DR WESTON, FL 33327

SUBJECT: MY MINI GROUP LLC Ref. Number: L16000137764

We have received your document for MY MINI GROUP LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Page 3 of 3 is a landscape copy.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Dionne M Pijeaux Regulatory Specialist

Letter Number: 117A00019098

SEP 28 AN II: 2

AGNACIO BENEROLISMO

COVER LETTER

TO:		istration Sec ision of Corp					
SUBJE	CT·	MY MINI C	ROUP LLC				
Sonar.	···		Name of Lim	ited Liability Company			
			Amendment and fee(s) are sub				
			GABRIELA SETRAKIAN	Į.			
	Name of Person						
			ARGENTAX LLC				
			Firm/Company				
			1241 CANARY ISLAND	DR			
			gabysetrakian@gmail.com				
For furt	her in	iformation co	oncerning this matter, please ca	to be used for future annual report notification)	TALL TALL		
Gabriel	a Set	rakian		786 458-3493 at ()	器 器 E		
	•	Name of	Person	Area Code Daytime Telephone Number	SEP 28 MIN STA		
Enclose	d is a	check for th	e following amount:		1 2		
\$25	.00 F	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certified	te of Status &		
		MAILE	NG ADDRESS:	STREET/COURIER ADDRESS:			

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MY MINI GROUP LLC		
(Name of the Lim	ited Liability Company as it now appea (A Florida Limited Liability Company)	rs on our records.)
he Articles of Organization for this Limited I	Liability Company were filed on $\frac{67}{2}$	7/22/2016 and assigned
florida document number L16000137764		
This amendment is submitted to amend the fol	lowing:	
a. If amending name, enter the new name of	of the limited liability company h	ere:
The new name must be distinguishable and contain the	words "Limited Liability Company," the	designation."LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	S S
Principal office address MUST BE A STRE	ET ADDRESS)	P 28
Inter new mailing address, if applicable:		E ORDE
Mailing address MAY BE A POST OFFICE	<u> </u>	
3. If amending the registered agent and egistered agent and/or the new registered of	• •	n our records, enter the name of the
Name of New Registered Agent:	ARGENTAX LLC	
New Registered Office Address:	1241 CANARY ISLAND DR	
	Enter Fla	orida street address
	WESTON	, Florida 33327
	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 (authorized to manage, enter, the title, name, and dress 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	ROMEO, RICARDO M	11527 SW 64 STREET APT D	
		MIAMI, FL 33173	
			☐ Change
MGRM _	ROMEO, FACUNDO H	11527 SW 64 STREET APT D	
		MIAMI, FL 33173	■ Remove
			☐ Change
MGR	ALICIA RAMIREZ	1109 ALEXANDER BEND	B Add
		WESTON, FL 33327	Remove
			Add
			☐ Remove
			Change
		.	
			FILED STARTINGS
			Change

fam	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Note:	tive date, if other than the date of filing: (optional) flective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.02 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed nent's effective date on the Department of State's records.
	SE T
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. of the earlier 80 00 by after the record is filed.
ate	AUGUST 24 , 2017
	Signature of a member or authorized representative of a member
	ROMEO, FACUNDO H Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00