L16 000139433

(Requ	iestor's Name)	
(Addı	ess)	
(Addr	ess)	
(City/:	State/Zip/Phone #)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Name)
(Docu	rment Number)	
Certified Copies	Certificates of	f Status
Special Instructions to Fi	ling Officer:	

Office Use Only



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COVER LETTER

	gistration Se vision of Cor			
CUD IEGT.		ESSI GROUP, LLC		
SUBJECT:		Name of Lim	ited Liability Company	
The enclose	d Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please retur	n all correspo	ndence concerning this matter	to the following:	
		JO ANN M. KOONTZ		
		KOONTZ & ASSOCIATE	Name of Person ES, PL	
		1613 FRUITVILLE RD.	Firm/Company	
		SARASOTA, FL 34236	Address	
			City/State and Zip Code	
		E-mail address: (to be used for future annual report notif	fication)
For further i	nformation co	oncerning this matter, please c	all:	
JO ANN M	. KOONTZ		941 225-2615 at ()	
	Name of	l Person	Area Code Daytinu	e Telephone Number
Enclosed 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)

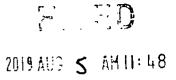
MAILING ADDRESS:

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



THE BONESSI GROUP, LLC

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

(A Florida Limited Liability Company)

	(A Horida Emilie	s Blacking Company)		
The Articles of Organization for this Limited L Florida document number L16000139433		y were filed on 07/25	/2016	and assigned
This amendment is submitted to amend the foll	owing:			
A. If amending name, enter the new name o	f the limited lia	hility company here	:	
N/A				
The new name must be distinguishable and contain the v	vords "Limited Lial	bility Company," the desig	gnation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applic	able:	N/A		
(Principal office address MUST BE A STREE	ET ADDRESS)			
Enter new mailing address, if applicable:		N/A		
(Mailing address MAY BE A POST OFFICE	BQX)			
B. If amending the registered agent and registered agent and/or the new registered o			ur records, <u>enter</u>	the name of the ne
Name of New Registered Agent:	N/A	····		
New Registered Office Address:		Enter Florida	street address	
			Florida	
		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(s) authorized to manage, enter the title, name, and address of each person being adde or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	ALAINA BONESSI, PLLC	P.O. BOX 51645	
			Add
		SARASOTA, FL 34232	■ Remove
		-	■ Remove
			☐ Change
AMBR	JAMES BONESSI, PLLC	P.O. BOX 51645	
			Add
		SARASOTA, FL 34232	
			Remove
		, and the second se	Change
	ALAINA BONESSI	P.O. BOX 51645	
AMBR	· 		= Add
		SARASOTA, FL 34232 US	
			□ Remove
			Change
	JAMES BONESSI	P.O. BOX 51645	
AMBR			Add
		SARASOTA, FL 34232 US	
			Remove
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Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records. the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of		
Effective date, if other than the date of filing:		
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Signature of a member or authorized representative of a member	Dated	ULY 24 2019)
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Filing Fee: \$25.00