## 616000192137

Office Use Only



100366436991

U5/28/21--U1U27--009 \*\*25.00



2 Kinse

## **COVER LETTER**

Registration Section

Tallahassee, FL 32314

TO:

Division of Cor	porations				
REV REAI SUBJECT:	LTY GROUP, LLC				
Sobster.	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:			
	Richard A Golden				
	Name of Person				
	KRAMER, GOLDEN & BROOK, PA				
	Firm/Company				
	12000 Biscayne Blvd, Suite 700				
	Address				
	Miami, FL 33181				
	City/State and Zip Code				
	rag@kgbpalaw.com				
		to be used for fiture annual report noti	tication)		
For further information c	oncerning this matter, please c	all;			
Richard A Golden		305 899-1800 at ( )			
Name of Person			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 Fiting Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
Mailing Address		Street Address:			
Registration Section Division of Corporations		Registration Section Division of Corporations			
P.O. Box 6327		The Centre of Tallahassee			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Lim	ited Liability Company as it now appears (A Florida Limited Liability Company)	s on our records.)	<del></del>
The Articles of Organization for this Limited	Liability Company were filed on $\frac{08/}{}$	15/2016	and assigned
Florida document number 116000152137			
This amendment is submitted to amend the fol	llowing:		
A. If amending name, gnter the new name	of the limited liability company he	<u>re</u> :	
The new name must be distinguishable and contain the	words "Limited Liability Company," the de-	esignation "LLC" or the a	abbreviation "L.L.C."
Enter new principal offices address, if appli	icable:	<u></u>	
Principal office address MUST BE A STRE	ET ADDRESS)	(7)	2021
			<del>-</del>
			Y 28
Enter new mailing address, if applicable:		<u>≅</u> m	
Mailing address MAY BE A POST OFFICE		<del></del>	
			<del></del>
3. If amending the registered agent and/or tgent and/or the new registered office addr	C.		ne of the new reg
Name of New Registered Agent:	Richard A Golden		
New Registered Office Address:	12000 Biscayne Blvd., Suite 700		
	Enter Flori	ida street address	
	Miami	Florida <u>3</u> .	3181
	Cirv		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 added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
		<del></del>	□Add
			□Remove
			□ Change
			□Add
			☐ Remove
			□ Change
		···	DbA□
			□Remove
			□ Change
	<del></del>		□ Add
			□Remove
			□ Change
			□ Add
		· · · · · · · · · · · · · · · · · · ·	□Remove
		<del> </del>	☐ Change
			□Add
			□Remove
			□ Chuna x

Typed or printed name of signee