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K. SALY MAR 1 7 2017

## **COVER LETTER**

	legistration Sec Division of Corp			
SUBJECT		ERPRISES GROUP LLC		
SOBJEC	•	Name of Limi	ited Liability Company	
The enclos	sed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please rett	arn all correspon	ndence concerning this matter	to the following:	
		ALISSON G. CARVALHO	)	
		<u>.</u>	Name of Person	
			Firm/Company	
		3693 NW 124TH AVE		
		<del></del>	Address	
		CORAL SPRINGS, FL 330	065	
			City/State and Zip Code	
		AL@ MAX HARDWOODI		
		E-mail address: (1	to be used for future annual report notifi	cation)
For furthe	r information co	oncerning this matter, please ca	all:	
ALISSON G. CARVALHO			954 235-4336 at ()	
	Name of	Person	Area Code Daytime	Telephone Number
Enclosed i	is a check for th	e following amount:		
□ \$25.00	0 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

2017 MAR 15 AM 11: 01
MALLAHASSEE, FLORIDA

A & R ENTERPRISES GROUP LLC

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

(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Co	ompany were filed on	03/06/2017	and assigned
Florida document number L17000051835	_•		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limit	ed liability company	here:	
The new name must be distinguishable and contain the words "Limit	ed Liability Company," th	ne designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRE	<u></u>		
		<u>.</u>	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			<del> </del>
B. If amending the registered agent and/or registered agent and/or the new registered office address agent and agent and/or the new registered office address agent and/or the new registered office address agent and/or the new registered office address agent and/or registered agent and/or the new registered office address agent and/or the new registered agent and/or registered agent and/or the new registered office address agent and/or the new registered office address agent and/or the new registered agent and/or the new registered office address agent and/or the new registered agent agen		on our records, e	nter the name of the new
New Registered Office Address:			
Tiew registered Office reducess.	Enter 1	Florida street address	
	City		Zip Code
New Registered Agent's Signature, if changing Registered	Agent:		
I hereby accept the appointment as registered agent as provisions of all statutes relative to the proper and conaccept the obligations of my position as registered age being filed to merely reflect a change in the registered company has been notified in writing of this change.	mplete performance ent as provided for i	of my duties, and I n Chapter 605, F.S	am familiar with and C. Or, if this document is
	If Changing Registered	Agent, <u>Signature of N</u>	ew 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
MGR	ROSA M CARVALHO	3693 NW 124TH AVE	□ Add
		CORAL SPRINGS, FL 33065	■ Remove
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		<del></del>	□ Remove
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<b>fective date, if other than</b> an effective date is listed, the date	must be specifi	ic and cannot be	prior to date	of filing or more	than 90 days	o <b>ptional</b> after filing	g.) Pursua:	nt to 605.02
ote: If the date inserted in the ocument's effective date on the				tutory filing r	equirements	, this date	e will not	be listed
record specifies a dela The 90th day after the			t not an e	ffective tim	ne, at 12:	01 a.m. /	on the	earlier
MARCHIA		2017			M	ר		
mated MARCH 13		,	——·/	[/ 1.h.	UMI)	/		
				1.114				

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Typed or printed name of signee

Filing Fee: \$25.00