

L17000054551

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

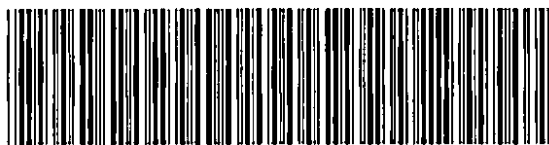
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17 JUL 20 PM 2:48
FILED
JUL 20 2017
FBI - BOSTON

M. MILLIGAN
JUL 20 2017

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: THE MONARCH INVESTMEN GROUP, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

MARINO PENA

Name of Person

THE MONARCH INVESTMEN GROUP, LLC

Firm/Company

274 WILSHIRE BLVD, STE 249

Address

CASSELBERRY, FL 32707

City/State and Zip Code

ANAPENA@MAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MARINO PENA

973

405-3731

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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

17 JUL 68 PM 2:48

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

This amendment is submitted to amend the following:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

SAME

SAME

SAME

Enter Florida street address

_____, **Florida** _____
City *Zip Code*

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.

Page 1 of 3

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>	<u>Address</u>	<u>Type of Action</u>
AMBR	MARINO PENA	274 WILSHIRE BLVD, STE 249	<input checked="" type="checkbox"/> Add
		CASSELBERRY, FL 32707	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	LISANDRO JORGE	274 WILSHIRE BLVD, STE 249	<input type="checkbox"/> Add
		CASSELBERRY, FL 32707	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

(None)

E. Effective date, if other than the date of filing: _____ (optional)
(If an effective 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 605.0207 (3)(b)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 JULY 20, 2017.

Lisandro Jorge

Signature of a member or authorized representative of a member

LISANDRO JORGE

Typed or printed name of signee

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DIVISION OF CORPORATIONS
STATE OF ARIZONA