(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of	Statu s]
Special Instructions to Filing Officer:	

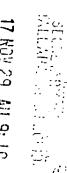
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COVER LETTER

TO: Registration Sec Division of Corp			
	CION GRUPO NETWORK I	.I.C	
SUBJECT:	Name of Lim	nited Liability Company	
The enclosed Articles of A	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	ARIEL AGUIRRE MONT	ГОҮА	
		Name of Person	
	CORPORACION GRUPO	NETWORK LLC	
		Firm/Company	
	1025 COUNTRY CLUB		
		Address	
	MARGATE FL 330 63		
		City/State and Zip Code	
	arielgruponetwork@gmail.e	com to be used for future annual report not	itigation)
For further information co	oncerning this matter, please c	·	incanon)
Ariel Agurirre		561 9325591	
Name of	Person		ne Telephone Number
Englosed is a check for th	e following amount:		
\$25.00 Fiting Fee	S30.00 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)
	NG ADDRESS:	STREET/COUR	
Registration Section Division of Corporations		Registration Secti Division of Corpo	
P.O. Bo Tallaha:	x 6327 ssee, FL 32314	Clifton Building 2661 Executive C Tallahassee, FL 3.	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

il		
(Name of the Limited Liability Compa [A Florida Limited]	any as it now appears on our records.) Liability Company)	
With the Emilies	muonny company)	
The Articles of Organization for this Limited Liability Company	y were filed on <u>03/21/2017</u>	and assigned
Florida document number 1.17000064854		
Torida decamen number		
This amendment is submitted to amend the fo llo wing:		
A. If amending name, enter the new name of the limited liab	sility company here:	
	my company nere.	
N/A		
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:	N/A	<u> </u>
(Principal office address MUST BE A STREET ADDRESS)	N/A	 5 51
	N/A	~ ~
		ي د
	N/A	7554 1714 1714
Enter new mailing address, if applicable:	Ν/Λ	- မှ ့
(Mailing address MAY BE A POST OFFICE\BOX)	N/A	-
	IN/A	(`,
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her		er the name of the new
registered agent and/or the new registered white address ner	<u>.</u> .	
Name of New Registered Agents		
Name of New Registered Agent:		
New Registered Office Address: N/A		
	Enter Florida street address	
N/A	, Florida	N/A
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:	<u>:</u>	

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 amendi or remove	ng Authorized Person(s) authorized to defined our records:	manage, enter the title, name, and addr	ess of each person being added
MGR=_	IM.		
<u>Title</u>	<u>Name</u>	Address	Type of Action
VP	JULIAN A AGUIRRE MONTOY!	1025 COUNTRY CLUB	
		MARGATE, FL 3363	■ Remove
			Change
			□ Add
			☐ Remove
			Change
			Add
			☐ Remove
			Change
			O Add
			□ Remove
			☐ Change
			□ Remove
			☐ Change
			DAdd
			□ Remove
			Change

amending any other info	ormation, enter change	e(s) here: (Attac	ch additional shee	ts, (f necessary.)	
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·	The state of the s				
fective date, if other tha	n the date of filing:	/12/2017		(optional)	
on effective date is listed, the date in the listed. If the date inserted in the date on the date on the date on the date on the date of t	ite must be specific and cannot this block does not meet to the Department of State's	of be prior to date of the applicable state records.	filing or more than 90 utory filing requires	days after filing.) Pursuments, this date will no	ant to 605,0207 of be listed as
record specifies a de The 90th day after the	layed effective date, e record is filed.	but not an ef	fective time, at	12:01 a.m. on th	e earlier of
nted					
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The second		100			
	121		resentative of a mem		
/ SARIE	L AGOINT	e Mo	of signee		
	Турс	d or printed name o	of signee		
	 				