

L17000089480

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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MAIL

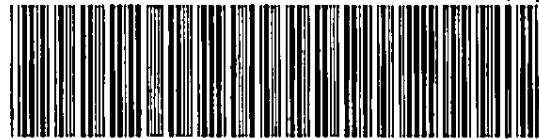
(Business Entity Name)

(Document Number)

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CLERK OF DISTRICT COURT  
JAN 18 2018

S. WARREN

JAN 18 2018

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: MM FLORIDA 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:

MARSHA SIHA

Name of Person

INCFILE.COM LLC

Firm/Company

17350 STATE HWY 249 SUITE 220

Address

HOUSTON TX 77064

City/State and Zip Code

MARSHA@INCFILE.COM

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

For further information concerning this matter, please call:

MARSHA SIHA

888 462-3453

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

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

MM FLORIDA 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 Company were filed on 04/21/2017 and assigned  
Florida document number L17000089480.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

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

Enter new principal offices address, if applicable: \_\_\_\_\_

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable: \_\_\_\_\_

(Mailing address MAY BE A POST OFFICE BOX)

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent: \_\_\_\_\_

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

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FLORIDA

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	Alejandro S Bashbuch	1920 Northgate BLVD UNIT A-5	<input type="checkbox"/> Add
		SARASOTA, FL 34234	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Juan Carlos Gonzalez	941 Golf Course Rd Apt 7	<input type="checkbox"/> Add
		Crystal Lake, IL 60014	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Perla V Guterrez Jaramillo	3771 TAMARACK CR	<input checked="" type="checkbox"/> Add
		CRYSTAL LAKE, IL 60012	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Luz A Guterrez Jaramillo	835 VIRGINIA RD SUITE J	<input checked="" type="checkbox"/> Add
		CRYSTAL LAKE, IL 60014	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Jesus I Becerra Rojasvertiz	835 VIRGINIA RD SUITE J	<input checked="" type="checkbox"/> Add
		CRYSTAL LAKE, IL 60014	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
	<del>Jesus I Becerra Rojasvertiz</del>		<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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1100

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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 the document's effective date on the Department of State's records.

Dated January 8, 2018

Sergio Orpeza Ruiz  
Signature of a member or authorized representative of a member

Typed or printed name of signee

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