## L17000090671

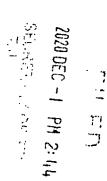
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## **COVER LETTER**

TO: Registratio Division of	n Section Corporations	•	t	
A - 1 - 2 - 3 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2	ı Spirit Group, LLC			
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Article	es of Amendment and fee(s) are sub	mitted for filing.		
Please return all corr	respondence concerning this matter	to the following:		
	Jorge Alejandro Fernandez			
		Name of Person		
	Hispanievision Internation	al Corp.		
		Firm/Company		
	3105 NW 107th Ave. Suite	e 400-H6		
		Address		
	Doral, FL 33178			
		City/State and Zip Code		
	E-mail address:	to be used for future annual report not	ification)	
For further informat	ion concerning this matter, please c			
Jorge Alejandro Fer	nandez	786 768-4775		
Na	ame of Person	Area Code Daytin	ne Telephone Number	
Enclosed is a check	for the following amount:			
□ \$25.00 Filing Fe	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 A	ddrocc.	Street Address:		
Mailing Address: Registration Section		Registration Se		
Division of Corporations			Division of Corporations The Centre of Tallahassee	
P.O. Box Tallahass	6327 see, FL 32314		oe Street, Suite 810	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Golden Spirit Group, LLC	www.it.new.onnound.on	
(Name of the Limited Liability Compan (A Florida Limited Li	(ability Company)	
The Articles of Organization for this Limited Liability Company v	were filed on 04/24/2017	and assigned
lorida document number L17000090671		
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liabil	lity company here:	
ne new name must be distinguishable and contain the words "Limited Cabit	ty Company," the designation "LLC" or the ab	obreviation "L.L.C."
nter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		SE
	•	
nter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		3 3 5
		<u> </u>
		; <b>F</b>
. If amending the registered agent and/or registered office ac <u>gent and/or the new registered office address here</u> :	ddress on our records, enter the nam	e of the new regist
Name of New Registered Agent:		
New Registered Office Address:		
<u>-</u>	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 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	Kar N. Grez Leisinger	10135 NW 54th Ter, Doral FL 33178	BAdd
			□Remove
			□Change
			□Add
			□Remove
			□Change
			Remove
			□Change
<del></del>			□ Add
			Remove
			□Change
			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
			Remove
			□Change
			□Remove
			□ Change

f amending	gany other information, enter change(s) here: (Attach additional sheets, if necessary.)	
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fan effective d Note: If the	ate, if other than the date of filing:	t to 605.0207 be listed as
record speci rd is filed.	cifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th d	ay after the
Dated Nover	ember 20 2020	· <del>·</del>
	Signature of a member or authorized representative of a member	
Jo	Forge Alejandro Fernandez./ Hispanicvision International Corp.	

Filing Fee: \$25.00