## L1700163687

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## **COVER LETTER**

	ivision of Corp						
SUBJECT	BLUMEL G	ROUP LLC					
300011.01	·	Name o	of Limited Liab	ility Company			
The enclos	ed Articles of A	Amendment and fee(s) as	re submitted f	or filing.			
Please retu	rn all correspor	dence concerning this n	natter to the fo	ollowing:			
		Un Tung Teng					
			N	ame of Person			
		Momentum Tax Acc	ounting Cons	ulting LLC			
			I	irm/Company			
		6996 Piazza Grande	Ave Ste 202				
				Address			
		Orlando FL32835					
			•	State and Zip Co	ode		
		ra@momentumtac.co		d for future and	ual report notific	ration)	
For further	r information co	oncerning this matter, ple		d to ruture am	mai report nourc	zacionty	
Un Tung				407	4403379		· · ·
On rung	···			at ()			
	Name of	Person		Area Code	Daytime	Telephone Number	
Enclosed i	s a check for th	e following amount:					÷.
\$25,00	) Filing Fee	□ \$30.00 Filing Fee Certificate of Sta	tus	55.00 Filing F Certified Copy additional copy i	y	Certified (	e of Status &
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314			Regis Divis Clifto 2661	EET/COURIE stration Section sion of Corpora on Building Executive Cen hassee, FL 323	tions iter Circle		

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BLUMEL GROUP LLC			
(Name of the Limit	ed Liability Compan (A Florida Limited Li	y as it now appears on our ability Company)	r records.)
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
he Articles of Organization for this Limited L	iability Company v	were filed on <u>08/28/201</u>	7 and assigned
lorida document number L17000183687			
his amendment is submitted to amend the follo	owing:		
If amending name, enter the new name o	f the limited liabil	lity company here:	
he new name must be distinguishable and contain the w	ords "Limited Liabilit	ty Company," the designation	on "LLC" or the abbreviation "L.L.C."
<u> </u>			
nter new principal offices address, if applic			
<u>Principal office address MUST BE A STREE</u>	<u>TADDRESS)</u>		
			- · ·
nter new mailing address, if applicable:			<u> </u>
   Mailing address MAY BE A POST OFFICE	BOX)		
1			
		•	
	or registered off	fice address on our	records, enter the name of the
egistered agent and/or the new registered o	<u>ffice address here</u>	:	
i i			
Name of New Registered Agent:	VAGNER A BL	UMEL	
N D 1 1007 411	1190 MUZANO	) ST #301	
New Registered Office Address:		Enter Florida stre	et address
	KISSIMMEE		34741
		City	, Florida 34741 Zip Code
		**** <b>*</b>	ing Court

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

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 **Type of Action Address** <u>Title</u> Name | VAGNER A. BLUMEL 1190 MUZANO ST #301 **AMBR** □ Add KISSIMMEE FL34741 ☐ Remove ■ Change □ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change ☐ Remove ☐ Change

□ Add \_□ Remove ☐ Change \_□ Add ☐ Remove \_□ Change

). If amending any other information. e	nter change(s) here: (Attach additional sheets, if necessary.)
,	
<del></del>	
<del></del>	
<ol> <li>Effective date, if other than the date (If an effective date is listed, the date must be sp</li> </ol>	ecific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)
Note: If the date inserted in this block do document's effective date on the Departm	ses not meet the applicable statutory filing requirements, this date will not be listed as the nent of State's records.
f the record specifies a delayed effe (b) The 90th day after the record is	ctive date, but not an effective time, at 12:01 a.m. on the earlier of: s filed.
Dated September 8th	2017
	ture of a member or authorized representative of a member
VAGNER A BLUMEL	
-	Typed or printed name of signee
	Page 3 of 3
	Filing Fee: \$25.00