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MAY 1 5 2019 D CUSHING

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: NO BIG Deal 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:	
JUAN J Perez- Name of Person	
Perebonia Law Group	
1414 NW 107th AVE #302	
Miami, FL 33172 City/State and Zip Code	
E-mail address (to be used for future annual report notification)	
For further information concerning this matter, please call:	-1 2 (20) 2 (7)
	DR TARK O
Enclosed is a check for the following amount:	OF STATE
\$25.00 Filing Fee \$\Bigcup \$30.00 Filing Fee & \Bigcup \$55.00 Filing Fee & \Bigcup \$60.00 Filing Fee. Certificate of Status & Certified Copy Certificate of Status &	410. MICH

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Certified Copy (additional copy is enclosed)

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

(additional copy is enclosed)

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Elmited Liability Compar (A Florida Limited L.	y as it now appears on our records.) iability Company)
The Articles of Organization for this Limited Liability Company of Florida document number <u>L17000187711</u> .	were filed on 4/4/2019 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	lity company here:
The new name must be distinguishable and contain the words "Limited Liabili	ty 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)	19 th 1 - 2 - 15 to 15 t
B. If amending the registered agent and/or registered off 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

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
M6R	Isaiah Barrett	5524 NW 114th Ave	
			Remove
			Change
			Add
			□ Remove
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lf an ef <u>Note:</u>	tive date, if other than the date of filing:
ne re The	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of a 90th day after the record is filed.
Yes of	· A.
Aica	\mathcal{A}
zate(I	Signature of a member or authorized representative of a member

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Filing Fee: \$25.00