## LITOCOPPONTI

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

Office Use Only



600304775786

10/24/17--01018--018 \*\*\$0.00

2117 OCT 24 AM 10: 18

K SALY OCT 2 5 2017

## **COVER LETTER**

TO:	Registration Se Division of Cor	ection Porations					
		GROUP, LLC					
SUBJE	T:Name of Limited Liability Company						
The enc	losed Articles of	Amendment and fee(s) are sub-	mitted for filing.				
Please r	etum all correspo	ondence concerning this matter	to the following:				
		SANDRA R CALDERAR	o				
			Name of Person				
	CALDERARO TYRRELL LAW GROUP						
Firm/Company							
6301 NW 5TH WAY, SUITE 2000							
Address							
FORT LAUDERDALE, FL 33309  City/State and Zip Code							
			to be used for future annual report notif	fication)			
For fur	ther information	concerning this matter, please co	ali:				
Claudia Bustamante			954 376-6161  at  Area Code Daytime Telephone Number				
	Name	of Person	Area Code Daytim	Telephone Number			
Enclos	sed is a check for	the following amount:					
□ \$2	5.00 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		stration Section sion of Corporations Box 6327	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301				

AL.

Canada La Canada

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



GALBER GROUP, LLC			
(Name of the Limited Li (A F	ability Company as it now appears on our records.) orda Limited Liability Company)		
	ty Company were filed on SEPTEMBER 21, 2017 and assigned		
Torida document number L17000196471	<del>.</del>		
This amendment is submitted to amend the following	3:		
A. If amending name, enter the new name of the	limited liability company here:		
he 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	<u> </u>		
Principal office address MUST BE A STREET A	DDRESS)		
Enter new mailing address, if applicable:	-		
Mailing address MAY BE A POST OFFICE BOX	2		
B. It amending the registered agent and/or is registered agent and/or the new registered office.	egistered office address on our records, enter the name of the address here:		
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
	, Florida		

## 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

It 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
AMBR	Yenny R Galvis Bustamante	7103 SW 53LN ST	
		MIAMI, FL. 33155 US	■ Remove
			Change
AMBR	Yenny R Galvis de Perez	7103 SW 53LN ST	■ Add
		MIAMI, FL. 33155 US	□ Remove
			Change
			20. Add 06.
			Remove
			□ Change 0
		· · · · · · · · · · · · · · · · · · ·	🗆 Remove
			Change
			O Add
			□ Remove
			Change
	<del></del>		
			П Remove
			□ Chanec

A

-			
			. 2
			8
			<u> </u>
			10
			my 3
	<u> </u>		
			70 <b>3</b>
	_ <del></del>	<u></u>	
			· · · · · · · · · · · · · · · · · · ·
<del></del>			
<del></del>			
e of filing:	- 1- d-1 C C I:	(option	d)
does not meet the appli	cable statutory filing re	man 90 days after ful quirements, this da	ng.) Pursuant to 605 ite will not be liste
tment of State's record	S.		
fective date, but n is filed.	ot an effective time	e, at 12:01 a.m	n. on the earlie
2017			
	1	· _/	
4		:	
	nortzed representative of a		
1	fective date, but n is filed.	specific and cannot be prior to date of filing or more does not meet the applicable statutory filing retiment of State's records.  fective date, but not an effective time is filed.	specific and cannot be prior to date of filing or more than 90 days after filing does not meet the applicable statutory filing requirements, this datement of State's records.  fective date, but not an effective time, at 12:01 a.m. is filed.

Page 3 of 3

Filing Fee: \$25.00