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Office Use Only



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COVER LETTER

EV PROPER SUBJECT:	RTY GROUP, LLC		
30bjec1.	Name of Limi	ited Liability Company	
The enclosed Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspor	ndence concerning this matter	to the following:	
	VICTOR E DELGADO		
		Name of Person	
	EV PROPERTY GROUP,	ILC	
		Firm/Company	·
	1110 BRICKELL AVENU	E, SUITE 402-5	
		Address	
	MIAMI, FL33131		
		City/State and Zip Code	
	VE.DELGADO@YAHOO.	COM	
	E-mail address: (t	to be used for future annual report notific	ation)
For further information co	ncerning this matter, please ca	ılı:	
VICTOR E DELGADO		786 554-0397	
Name of	Person	at () Area Code Daytime 1	Celephone Number
Enclosed is a check for the	e 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

TO:

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

EV PROPERTY GROUP, LLC (Name of the Lim	ited I is bility Comes	investit now annears on our records		
(Laure At his Diffe	(A Florida Limited	ny as it now appears on our records.) Liability Company)		
he Articles of Organization for this Limited I	and assi	and assigned		
lorida document number L17000202476				
his amendment is submitted to amend the fol	lowing:			
. If amending name, enter the new name of	of the limited liab	ility company here:		
e new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation "LLC" or th	e abbreviation "L.L	.C."
nter new principal offices address, if appli-	cable:	1110 BRICKELL AVENUE		U
rincipal office address MUST BE A STREI		SUITE 402-5	8	SIA
		MIAMI, FL 33131	Ę.	3%
			24	
nter new mailing address, if applicable:		1110 BRICKELL AVENUE	<u> </u>	28.05 20.05 20.05
failing address MAY BE A POST OFFICE	BOX)	SUITE 402-5	رن ا	,=; ;= =,
		MIAMI, FL 33 13 1	55	
If amending the registered agent and gistered agent and/or the new registered of New Registered Agent:			er the name o	f the
New Registered Office Address:	1110 BRICKEI	LL AVE, SUITE 402-5		
The Inglisher of the Fidures.		Enter Florida street address		
	MIAMI	, Florida	33131	
		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, <u>enter the title, name, and address of each person being added</u> <u>or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	VICTOR E DELGADO	1110 BRICKELL AVENUE	
			D Add
		SUTTE 402-5	
		MIAMI, FL 33131	Remove
			☐ Change
			D Add
			Remove
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ffective date, if other than the date of filing:	(optional)	
an effective date is listed, the date must be specific and cannot be prior to date of filing or note: If the date inserted in this block does not meet the applicable statutory filing	nore than 90 days after filing.) Pursuant to 605 ng requirements, this date will not be liste	i.02 ed
ocument's effective date on the Department of State's records.	•	
e record specifies a delayed effective date, but not an effective	time, at 12:01 a.m. on the earlie	er
The 90th day after the record is filed.		
ated		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00