Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H18000064760 3)))



H180000647603ABC%

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : ALVAREZ, SUAZO & ASSOCIATES

Account Number : I20130000076 Phone : (305)388-702

Phone : (305)388-7028 Fax Number : (305)479-2705 RECEIVED

FEB 2 7 2018

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:	

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN JUGAR GROUP LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

18 FEB ET AM 9:49

Electronic Filing Menu

Corporate Filing Monu

Help FEB 2 8 2018

Y SULKER

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	JUGAR	GROUP LLC				
(Name of the Limi	ted Liability C (A Florida Lin	ompany as it now apprited Liability Compan	pears on our records.	(,	_	
The Articles of Organization for this Limited L Florida document number L18000044937	Liability Com	pany were filed on	02/20/2018	and	d assign	ned
This amendment is submitted to amend the foll	lowing:					
A. If amending name, enter the new name of	of the limited	l liability compan	v here:			
N/A						
The new name must be distinguishable and contain the	words "Limited	Liability Company." t	he designation "LLC"	or the abbreviatio	n "L.L,(C."
Enter new principal offices address, if appli-	cable:					
(Principal office address MUST BE A STRE	ET ADDRES	<u></u>				
Enter new mailing address, if applicable:		(1), Q2	<u> </u>	<u> </u>	18	
(Mailing address MAY BE A POST OFFICE	ROX)				EB	•
Inguining madress 17774 DE 744 ODA OA A 402	. DO10			S) ×	129	<u> </u>
B. If amending the registered agent and	1/			in the second		the new
B. If amending the registered agent and registered agent and/or the new registered of	vor register office addr <u>es</u>	eo omice address s here:	on our records,	COTET THE US	inde or	Lite Mery
		t			6 1	
Name of New Registered Agent:	N/A	<u></u>				
New Registered Office Address:		Frior	Florida street address			
		Enter	1 101100 30 600 0001033			
			, Flo	rida		
		City		Zip (_oae	

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>	Name	Address	Type of Action
AMBR	JULIANA TOBON GARCIA	7951 RIVIERA BLVD SUITE 210	
		MIRAMAR, FL 33023	Remove
		<u> </u>	Change
AMBR	KARINA TOBON GARCIA	7951 RIVIERA BLVD SUITE 210	
		MTRAMAR, FL 33023	≅ Remove
			Change
AMBR	90% JULIANA TOBON GARCIA	7951 RIVIERA ĽLVD SUITE 210	Add
-		MIRAMAR, FL 33023	O Remove
			□ Change
AMBR	10% KARINA TOBON GARCIA	7951 RIVIERA BLVD SUITE 210	= Add
		MIRAMAR, FL 33023	□ Remove
		a region A.	Change
			□ Add
			Remove
	•	, , , , , , , , , , , , , , , , , , , 	Change
			49 104
			☐ Remove

N/A			
		•	
	<u>:</u>		
			<u>20</u> _
			<u> </u>
	- 400		₹
		3	<u> </u>
			
			_
		3-	_
tive date, if other than the date of filling: fective date is listed, the date must be specific and cannot be prior to date of fill If the date inserted in this block does not meet the applicable statuto ment's effective date on the Department of State's records.	(optional) ing or more than 90 days after filing ry filing requirements, this date	.) Pursuant R	o 60 e lis
ecord specifies a delayed effective date, but not an effective day after the record is filed.	ctive time, at 12:01 a.m.	on the e	arli
02/26/2018 d			
,	(m 9-		
Signature of a member or authorized repres	entative of a member		_

Page 3 of 3