L1800054384

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COVER LETTER

TO: Registration S Division of Co			
	O GROUP, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
	ondence concerning this matter		
	RADHAMES LUQUIS		
	•	Name of Person	
	ALTERNO GROUP LLC		
		Firm/Company	
	117 NE 1ST AVE 1		
		Address	
	MIAMI, FL 33132 US		
		Ciry/State and Zip Code	
	RLUQUIS@ALTERNOAC	GENCY.COM to be used for future annual report notifie	ration)
For further information of	concerning this matter, please ca		,
RADHAMES LUQUÍS		at ():	
Name (of Person	Area Code Daytime	Telephone Number
Enclosed is a check for t	he 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)
Regist Divisio	ING ADDRESS: ration Section on of Corporations ox 6327	STREET/COURIE Registration Section Division of Corporat Clifton Building	

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ALTERNO GROUP, LLC	-	·
(Name of the Limited Liability Compa (A Florida Limited	iny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L18000054384</u> .	were filed on 03/01/2018	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:		,
Principal office address MUST BE A STREET ADDRESS)	117 NE IST AVE	
	MIAMI, FL 33132 US	
		8
Enter new mailing address, if applicable:		<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		 <u>r</u>
		, se
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	ffice address on our records, ent	ter the name of the no
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		. O
	<u>c</u> :	·.

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.

Cuv

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:

<u>Title</u>	Name	Address	Type of Action
		10.	☐ Remove
			☐ Change
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			Add
			□ Remove
			Change
			□ Rémové
			□ Change

•	2018, Freceived the Cert	tification, but I fo	und some misspellir	g errors	
on my name and o	n the business address.				4
Those errors were:					
A missing letter "e	" on my name. My corr	ect name is Radh	ames Luquis.		· · ·
The country in bus	siness address was wron	g. The country sh	ould be US.		
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effective date is listed, to	than the date of filin he date must be specific an d in this block does not a c on the Department of S	d cannot be prior to meet the applicab	date of filing or more to le statutory filing re-	(option: han 90 days after fili quirements, this da	ng.) Pursuant to 60
	delayed effective of the record is filed.		an effective time	e, at 12:01 a.n	n. on the earl

Page 3 of 3

Filing Fee: \$25.00