## 118000091231

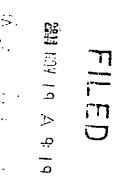
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer:	
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September 26, 2018

ANDRES DIAZ PO BOX 720631 MIAMI, FL 33172

SUBJECT: 910 GROUP INC Ref. Number: L18000091231

We have received your document for 910 GROUP INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please  $call^{\circ}$  (850) 245-6051.

Dionne M Scott Regulatory Specialist II

Letter Number: 418A00020041



## **COVER LETTER**

	egistration Se ivision of Cor				
SHRIFCT	910 GROU				
SOBJECT	•	Name of Lim	ited Liability Company		
The enclos	ed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please retu	rn all correspo	indence concerning this matter	to the following:		
		ANDRES DIAZ			
			Name of Person		
		910 GROUP INC			
			Firm/Company		
		PO BOX 720631		77 B	ł.,
			Address		-1
		MIAMI, FL 33172			
		910groupinc@gmail.com	City/State and Zip Code		› از از
		E-mail address: (	to be used for future annual report notif	ication)	
For further	information c	oncerning this matter, please ca	all:	777	₹
Andres Di	az		305 910-7666		
	Name o	f Person	Area Code Daytime	Telephone Number	
Enclosed is	s a check for th	ne 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 Statu Certified Copy (additional copy is encl	
	Registr Divisio P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 assee, FL 32314	STREET/COURI Registration Section Division of Corporn Clifton Building 2661 Executive Ce Tallahassee, FL 32	n ations nter Circle	

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

910 GROUP INC				
(Name of the Lim	ited Liability Com (A Florida Limite	pany as it now appear d Liability Company)	s on our records.)	
he Articles of Organization for this Limited I	_iability Compar	ny were filed on	04/11/2018	and assigned
orida document numberL18000091231				
his amendment is submitted to amend the fol	lowing:			
. If amending name, enter the new name of	of the limited li	ability company he	<u>re</u> :	
ne new name must be distinguishable and contain the	words "Limited Lie	bility Company," the d	esignation "LLC" or the	abbreviation "L.L.C."
nter new principal offices address, if appli		, •••••,••••		
• •				· · · · -
<u> Principal office address MUST BE A STRE</u>	<u>ET ADDRESS)</u>			
nter new mailing address, if applicable:		PO BOX 72063	l	
Mailing address MAY BE A POST OFFICE BOX)		MIAMI, FL 331	72	
-				
. If amending the registered agent and	l/or registered	office address on	our records, ente	r the name of the
egistered agent and/or the new registered of				ي ي
			3:	· • •
Name of New Registered Agent:	ESTELA Y	CASSAU		
New Registered Office Address:	13944 SW 1		<del></del> _	· · · · · · · · · · · · · · · · · · ·
		Enter Flor	ida sireet address	
	MIAMI		, Florida <u>-</u>	33196
		City		Ziv 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>	Name	<u>Address</u>	Type of Action
MGR	ESTELA Y CASSAU	PO BOX 720631 MIAMI, FL 33172	Add
			□ Remove
			Change
			Add
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	ffective	e date, if other than	the date of fili	ng:	. day of files	(0	ptional)	Domeston to	ራስፍ በኃብ
ffective date, if other than the date of filing:	ote: If	f the date inserted in th	is block does not	meet the application	able statutory fili	ng requirements.	this date w	rursuant to t rill not be l	listed as
ote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as	ocumen	nt's effective date on th	e Department of	State's records.					
ote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as	≥ reco	ord specifies a dela	yed effective	date, but no	t an effective	time, at 12:0	1 a.m. o	n the ea	rlier o
Sote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as 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 earlier of the content	The 9	Oth day after the	record is filed	i.					
ote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ocument's effective date on the Department of State's records.	ated.	November, 11	/	2018					
e record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier on The 90th day after the record is filed.				_ `	<u> </u>				
lote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ocument's effective date on the Department of State's records.  The sound specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of The sound is filed.		/	~_/			e of a member			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00