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COVER LETTER

TO: Registration S Division of Co			
SUBJECT:	LGC Group Name of Lim	ited Liability Company	···
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	John	Name of Person	
	LGC	Group - DR L	LC.
	14286	- 19 Beach	Blud Sulte 167
	Jackson	VILLE, FI, 32 City/State and Zip Code	2.50
	Se-mail address: (<u></u>	COUZPR: COM
For further information	concerning this matter, please ca	all:	
<u>John</u>	of Person	at (SOY) M/3 ~ Area Code Daytime	3600 e Telephone Number
Enclosed is a check for	the 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 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

(Name of the Limited (A	Liability Company as it now appears Florida Limited Liability Company)	on our records.)	<u></u>
The Articles of Organization for this Limited Liab	oility Company were filed on		and assigned
Florida document number	·		ن ا
This amendment is submitted to amend the follow	ring:		2
A. If amending name, enter the new name of the	he limited liability company he	<u>re</u> :	2: 30
The new name must be distinguishable and contain the word	ds "Limited Liability Company," the de	signation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applicab	1/.et.	<u> 20thrriaga</u>	CIC BRANCHAR
(Principal office address MUST BE A STREET	ADDRESS) KISSIM	mee, H	34 45
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	240 <u>KISIM</u>	sutrnwood nee, Fl ?	ur 34743
B. If amending the registered agent and/or registered agent and/or the new registered office	~	our records, enter	the name of the new
Name of New Registered Agent:	Minn all Maria Millian a caral	La otton William	
New Registered Office Address:	Enter Flori	da street address	
	Mallinamanana	, Florida	BHAMMAND.

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>	<u>Name</u>	Address	Type of Action
MGR	Lewis and Cole L.L.C	170 Oak Munor N Sant Rose, LA 70067	Add
		<u> </u>	Remove
			Change
AMBR	Reynaldo Collazo	1970 E. Oscola PKW Kissimmee, Fl 34743	Add
			□ Remove
			🗖 Change
MGR	John Lewis	330 3rd St. S St. Petersburg, Fl 33701	🗹 Add
		-	Remove
			Change
			□ A dd/
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Filing Fee: \$25.00