

18000201392

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

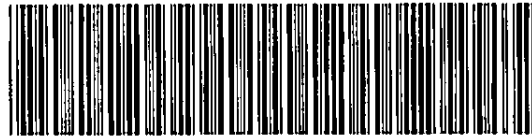
(Document Number)

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18 OCT 15 AM 5:20  
ST. LOUIS, MO  
FALLGROVE, ILLINOIS

K. SALY

OCT 15 2018



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 4, 2018

SUSSMANN GROUP  
OSCAR SUSSMANN  
811 SW 14 AVE.  
CAPE CORAL, FL 33991

SUBJECT: SUSSMANN GROUP, LLC  
Ref. Number: L18000201392

We have received your document for SUSSMANN GROUP, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document submitted is incomplete. Enclosed is the missing page 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 (850) 245-6051.

Karen A Saly  
Regulatory Specialist II

Letter Number: 218A00020730

Affection

KAREN A SALLY

FROM

OSCAR SUSSMAN  
SUSSMAN GROUP

THANK YOU FOR all your Help  
and understanding

OSCAR SUSSMAN  
561 702 9384

FAX

850 245 6030

2018 OCT -9 AM 9:02

2018 OCT -9 AM 9:02

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: SUSSMANN GROUP LLC  
Name of Limited Liability Company

L18000201392

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

OSCAR SUSSMANN  
Name of Person  
SUSSMANN GROUP  
Firm/Company  
811 SW 14 AVE  
Address  
CAPE CORAL FL 33991  
City/State and Zip Code  
OSUSSMANN7@GMAIL.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

OSCAR SUSSMANN at (561) 702 9384  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☒ ~~\$55.00~~ 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

FROM :

FAX NO. :

Jan. 01 2000 12:03AM P1

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

FILED  
18 OCT 15 AM 5:20  
SEALING UNIT  
TALLAHASSEE, FLORIDA

SUSSMANN GROUP, LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 8 28 18 and assigned  
Florida document number L18000201392

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

New Registered Office Address:

*Enter Florida street address*

\_\_\_\_\_, **Florida**  
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, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

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18 OCT 15 AM 5:20  
Se  
TALLAHASSEE, FLORIDA

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Oscar Sussmann	811 SW 14TH AVE	<input checked="" type="checkbox"/> Add
		CAPE CORAL, FL 33991	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Patricia Interiano	811 SW 14TH AVE	<input checked="" type="checkbox"/> Add
		CAPE CORAL, FL 33991	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Jesus Boquin	811 SW 14TH AVE	<input checked="" type="checkbox"/> Add
		CAPE CORAL, FL 33991	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Gabriel Interiano	811 SW 14TH AVE	<input type="checkbox"/> Add
		CAPE CORAL, FL 33991	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Sanjeev Kulshreshtha	811 SW 14TH AVE	<input type="checkbox"/> Add
		CAPE CORAL, FL 33991	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Edwin Sussmann	811 SW 14TH AVE	<input type="checkbox"/> Add
		CAPE CORAL, FL 33991	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

MGR EDGARDO SUSSMANN 8115014AL REMOVE  
MGR SONYA SUSSMANN 8115014AL REMOVE

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18 OCT 15 AM 5:20  
CLERK OF THE COURT

E. Effective date, if other than the date of filing: 9-27-15 (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)  
**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:  
(b) The 90th day after the record is filed.

Dated September 27  
August 28 2018

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member

Oscar Sussmann

\_\_\_\_\_  
Typed or printed name of signer