# 48000248143

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



500334751905

08/28/19--01011--009 ••25.00

SECOLUTION OF THE COMMENT OF THE COM

OCT 12 2019 S. YOUNG

# **COVER LETTER**

Divi	ision of Cor	porations	,				
SUBJECT:	CONOS GI	ROUP LLC	,				
Name of Limited Liability Company							
The enclosed	Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please return	all correspo	ndence concerning this matter	to the following:				
		Camilo Valencia					
		<del>. ,</del>	Name of Person				
		Valencia & Torres Law, Pt	J.C.				
			Firm/Company				
		7715 NW 48th ST, STE 39	0				
			Address	<del></del>			
		Doral, FL 33166					
		office@valenciatorreslaw.co	City/State and Zip Code				
		E-mail address: (t	o be used for future annual report notifi	cation)			
For further in	formation co	oncerning this matter, please ca	dl:				
Camito Valer	ncia		305 364-5792 at ()				
	Name of	Person	Area Code Daytime	Telephone Number			
Enclosed is a	check for th	e following amount:					
<b>≘</b> \$25.00 Fi	lling Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing ' Certificate c Certified C (additional			

### MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

## STREET/COURIER ADDRF

Registration Section Division of Corporations Clifton Building 2661 Executive Center C Tallahassee, FL 32301

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CONOS 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 10/22/2018 and assigned Florida document number 1.18000248143 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

#### 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.

City

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	AARON, BRIAN	245 NE 14TH ST, STE 3511 MIAMI, FL 33132	Add
		<del></del>	■ Remove
			☐ Change
	<del></del>		
			□ Remove
			Change
<del></del>			
			Remove
		<del></del>	Change
<del> </del>	<del></del>		□ Add
		· · · · · · · · · · · · · · · · · · ·	□ Remove
			☐ Change
			Add
			Remove
			□ Change
	<del></del>		
			Remove
			Change

		<u> </u>	<del>_</del>			
	<del> </del>		<del></del>			
		<del>-</del>	<u> </u>			
-		<del>-</del>	<u></u> .			
		<del></del>	<del>_</del>	<del>-</del>		
	<u></u>				<del>.</del>	
		·	<del></del> -			
	<del>-</del>	<del></del>	<u> </u>			<del></del>
<del></del> -		, , , , , , , , , , , , , , , , , , ,	<u> </u>		<del></del>	<del></del>
·					<u>.                                    </u>	
						_
			_			
		<u>-</u>		<del>.</del>		
						<del></del>
ective date, if	other than the d		/10/2019		(optional)	
effective date is te: If the date	listed, the date must l	be specific and can k does not meet	the applicable	te of filing or more th statutory filing req	an 90 days after filing.) uirements, this date v	Pursuant to 605,0207 ( vill not be listed as t
ne 90th day	after the recor	effective date d is filed.	e, but not an	effective time	, at 12:01 a.m. c	on the earlier of:
ed	2.3		()19			1
<del></del>	( ani	eo Va	ein	affermy	+ regis,	send a just
		constitues of a manage	المحينية والمعارية والمعارية		. <del></del>	<del></del>

Page 3 of 3

Filing Fee: \$25.00