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(Re	questor's Name)	
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PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
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Special Instructions to	Filing Officer:	

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COVER LETTER

TO:	Registrati Division o	ion Sect of Corpo	ion prations		
SUBJEC		A GROU			
CODULC	~ "·	_		ited Liability Company	
			mendment and fee(s) are sub	•	
· · · · · · · · · · · · · · · · · · ·		respone	EDUARDO UELTSCHI	to the following.	
				Name of Person	_
			UELTSCHI & CO. LLC	Nume of Fession	
Firm/Company				_	
			32 S OSPREY AVE STE I	101	
Address			_		
			SARASOTA, FL 34236		
			RA@UELTSCHLCO	City/State and Zip Code	_
				to be used for future annual report notification)	202 3-5-1
For furth	er informa	tion con	cerning this matter, please ca	all:	
EDUAR	DO UELT	SCHI		941 549-8549 at ()	7020 AUG -3
		ame of P	erson	Area Code Daytime Telephone Number	
Enclosed	l is a check	for the	following amount:		2
\$25.	00 Filing F	`ee	☐ \$30.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certifie	ate of Status &
	<u>Mailing A</u> Registrat		ction	Street Address:	

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

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ETNA GROUP LLC	
(<u>Name of the Limited Liability Company as it now a</u> (A Florida Limited Liability Comp	appears on our records.)
The Articles of Organization for this Limited Liability Company were filed or	on 01/04/2019 and assigned
Florida document number 1.19000007049	
his amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability compa	ny 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)	2021 SEC TA
Inter new mailing address, if applicable:	्राप्त का उक्ष जिल्लामा जिल्ला
Mailing address MAY BE A POST OFFICE BOX)	(n), =
	2
B. If amending the registered agent and/or registered office address on ogent and/or the new registered office address here: Name of New Registered Agent:	our records, enter the name of the new regist
Name of New Registered Agent:	
New Registered Office Address:	er Florida street address
Ciny	, 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.

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

Title	<u>Name</u>	Address	Type of Action
AMBR	SALAFIA, DANIELA A	408 80TH STREET	□ Add
		HOLMES BEACH, FL 34217	≡Remove
			□Change
AMBR	BARLOC HOLDING LLC	408 80TH STREET	≣Add
		HOLMES BEACH, FL 34217	□Remove
			□Change
			□Add
			202 Remove AUG Change PM AUG P
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			□Change
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Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 or Note: If the date inserted in this block does not meet the applicable statutory filing requirem document's effective date on the Department of State's records.	(optional) days after filing.) Pursuant to 605 ents, this date will not be liste	5.0207 (3 ed as the
the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlicord is filed.	ier of: (b) The 90th day after	r the
Dated July 27 2020 Signature of a member of authorized representative of a member		

Typed or printed name of signee