## LIGOCOICICICS

(Red	questor's Name)	
(Ado	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bus	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to I	Filing Officer:	





600332896086

08/22/19--01022--019 ++25.00





## **COVER LETTER**

Div	ision of Cor <sub>i</sub>	porations		
SURTECT:		M PROPERTY GROUP LLC		
	<del></del>	Name of Lim	ited I rability Company	
The enclosed	l Articles of .	Amendment and fee(s) are sub	mitted for filing.	
		ndence concerning this matter		
		CAROLINE TAVEIRA A	RANTES	
		GOLD PALM PROPERTY	Name of Person CGROUP LLC	
		9343 EDEN ROC COURT	Firm-Company	
		DELRAY BEACH, FL 33-	Address 446	
		juhanadsuniversal@gmail.e	City State and Zip Code	
		E-mail address; ri	to be used for future annual report notif	leation)
For further in	iformation co	oncerning this matter, please ea	ill:	
CAROLINE	TAVEIRA A	ARANTES	954 5329000	
	Name of	Person	at ()  Area Code Daytime	Telephone Number
Enclosed is a	check for th	e following amount:		
<b>■</b> \$25,00 F	iting 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 tadditional copy is enclosed)

MAILING ADDRESS:

Registration Section

TO:

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, Ft. 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GOLD PALM PROPERTY 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  $\frac{04/18/2019}{1}$ \_ and assigned Florida document number 1.19000107036 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 "LLC." 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 & 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

## 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, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	JALES CASTRO	6837 POINT HANCOCK DR WINTER GARDEN FL 34787	■ Add
			□ Remove
			□ Change
			Add
			☐ Remove
			Change
<del></del>			
			☐ Remove
			□ Change
			□ Add
			□ Remove
			☐ Change
<del></del>			Add
			☐ Remove
			C Change
<del></del>			O Add
			□ Remove
			□ Change

	······································		
		- <del></del>	
<del></del>			
ctive date, if other than the	08/14/2019		( <b>:</b>
effective date is listed, the date mus	t be specific and cannot be prior to ick does not meet the applica	o date of filing or more tha	(optional) n 90 days after filing.) Pursuant to 605.0 irements, this date will not be listed
ecord specifies a delayed ne 90th day after the reco	effective date, but not ord is filed.	an effective time,	at 12:01 a.m. on the earlie
d AUGUST 14	2019		
0	Elocus Cironte Signature of a member or autho		

Page 3 of 3

Typed or printed name of signae

Filing Fee: \$25.00