

5/18/22, 11:21 AM

Division of Corporations

## Florida Department of State

Division of Corporations  
Electronic Filing Cover Sheet**L19000248184**

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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : GOYENECHEA PROFESSIONAL SERVICES LLC  
Account Number : I20190000078  
Phone : (561)341-1582  
Fax Number : (561)264-6286

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
GRUPO BEING LLC**

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$25.00

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2022 MAY 18 AM 8:43

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AND  
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## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: GRUPO BEING LLC**  
Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

Pablo E Goyenechea

Name of Person

GOYENECHEA PROFESSIONAL SERVICES LLC

Firm/Company

3175 S CONGRESS AVE, SUITE 305-B

Address

PALM SPRINGS, FLORIDA 33461

City/State and Zip Code

admin@gpscontador.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Pablo E Goyenechea

561

341-1582

at ( )

Name of Person

Area Code

Daytime 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 Address:**

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

GRUPO BEING 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 09/27/2019 and assigned  
Florida document number L19000248184.

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)

3175 S CONGRESS AVE

SUITE 305-B

PALM SPRINGS, FL 33461

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

3175 S CONGRESS AVE

SUITE 305-B

PALM SPRINGS, FL 33461

**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:

GPS CONTADOR

New Registered Office Address:

3175 S CONGRESS AVE, SUITE 305-B

*Enter Florida street address*

PALM SPRINGS

Florida

*City*

33461

*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.*

*Pablo Goyenechea*

If Changing Registered Agent, Signature of New Registered Agent

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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>	<u>Address</u>	<u>Type of Action</u>
MGR	GONZALEZ, KARINA E	3175 S CONGRESS AVE	<input type="checkbox"/> Add
		SUITE 305-B	<input type="checkbox"/> Remove
		PALM SPRINGS, FL 33461	<input checked="" type="checkbox"/> Change
MGR	OLGUIN, JORGE R	3175 S CONGRESS AVE	<input type="checkbox"/> Add
		SUITE 305-B	<input type="checkbox"/> Remove
		PALM SPRINGS, FL 33461	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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