119000260083

(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



800339007498

01/10/25 -- 01012---011 **25.00

O SIMMONS FEB 1 0 2020

COVER LETTER

TO: Registration Section

Tallahassee, FL 32314

Division of Cor	porations			
BETTER E	BUSINESS GROUP LLC			
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and feets) are sub	mitted for filing.		
	indence concerning this matter	_		
r rease retain an correspo	nadence concerning this matter	to the tollowing.		
	LUZ M WHITAKER			
		Name of Person		
	BETTER BUSINESS GF	ROUP LLC		
		Pirm/Company		
	7661 BRISTOL BAY LN			
		Address		
	LAKE WORTH FL 3346			
		City/State and Zip Code		
	lucywhitaker28@gmail.co			
	E-mail address (to be used for future annual report not	ification	
Lor further information c	oncorning this matter, please co	मी:		
Luz M Whitaker		561 5772906		
Name o	l'Person	at ()		
Enclosed is a check for the	re following amount:			
,		FI \$55 ON HITOLOGY USE &	(T. 840 no 130 1	
32.7.00 Faing FCC	f) \$30,00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy radditional copy is enclosed?	[7] \$60,00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Address:		Street Address:		
Registration Section Division of Corporations		Registration Section Division of Corporations		
P.O. Box 6327		The Centre of Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, F1, 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BETTER BUSINESS 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 _ __ and assigned Florida document number ____L19000260083 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 of the new registered agent and/or the new registered office address here: N/A Name of New Registered Agent: N/A New Registered Office Address: Enter Florido 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 tiled 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

<u>Title</u>	Name Alal +	<u>Address</u>	Type of Action
AMBR 	Jose Norberto Giraldo Piucia	7661 BRISTOL BAY LN LAKE WORTH 33467	:X \dd
			□Remove
	_		□Change
		 	□ Add
			□Remove
			🖺 Change
			□Add
			□Remove
			🗆 Change
			□Add
			🗆 Remove
			□Change
			□Add
			□Remove
Andrews			_ □Add
			ERemove
			□Change