L21000042707

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COVER LETTER

TO:	Registration Se Division of Cor			
SUBJE		SEARCH GROUP, LLC		
SUBJE	UI:	Name of Limi	ted Liability Company	
The encl	losed Articles of	Amendment and fee(s) are sub-	nitted for filing.	
Please re	eturn all correspo	ondence concerning this matter	to the following:	
		DEBORAH M. MARTIN.	ESQ	
			Name of Person	
		MARTIN LAW PA		
			Firm/Company	
		9240 SUNSET DRIVE, SU	JITE 109	
			Address	
		MIAMI, FL 33173		
			City/State and Zip Code	·
		Jreyes@martinlawpa.com E-mail address: (1	o be used for future annual report notific	ation)
For furth	her information c	oncerning this matter, please ca		
Deboral	h Martin, Esq		786 615-7149	
Name of Person		f Person	at ()	elephone Number
Enclose	d is a check for th	he 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		Street Address: Registration Secti	ion

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

(Name of the Lim	ited Liability Company as it now app (A Florida Limited Liability Company	ears on our records.)
The Articles of Organization for this Limited I Florida document number L21000042707	iability Company were filed on	JANUARY 22, 2021 and assigned
This amendment is submitted to amend the fol	lowing:	
A. If amending name, enter the new name of	of the limited liability company	here:
The new name must be distinguishable and contain the	words "Limited Liability Company," th	e designation "L.L.C" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	
Principal office address MUST BE A STRE	ET ADDRESS)	24
Enter new mailing address, if applicable:		SEP 13
Mailing address MAY BE A POST OFFICE	BOX)	58 5
B. If amending the registered agent and/or agent and/or the new registered office addre	C.	r records, enter the name of the new regis
Name of New Registered Agent:	Deborah M. Martin, Esq. Marti	in Law P.A.
New Registered Office Address:	9240 Sunset Drive, Suite 109	W
	Enter F Miami	Florida street address , Florida 33173
	City	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

HEISTI RESEARCH GROUP, LLC

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.

H 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>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
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			□Change

		 		
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ective date, if other than the d effective date is listed, the date must be: If the date inserted in this blocument's effective date on the Dep	be specific and cannot be prior to ck does not meet the applicab	date of filing or more tha		
	date, but not an effective time	e, at 12:01 a.m. on the	earlier of: (b) The 9	0th day after the
s filed.	2024			
s filed.		.·		
s filed. August 26		.•		
led	; 2024 ; Signature of a member or authoriz	zed representative of a m	iember	