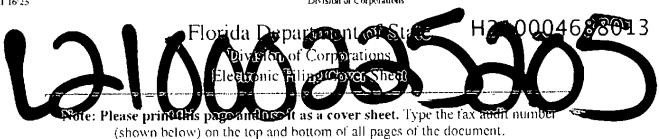
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Division of Corporations



(((H210004688013)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Page: 2 of 8

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : SACONSA GROUP LLC

Account Number : I20200000187 Phone : (786)757-2436 Fax Number : (786)513-5977

\*\*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 GERSINGER LLC

Certificate of Status	0
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Page Count	01
Estimated Charge	\$25.00

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### **COVER LETTER**

H210004688013

17865135977

T T		**		<b>3</b>	
	gistration Sect ision of Corpo				
SUBJECT:		RSINGER LLC			
SUBJECT		Name of Lini	ited Liability Company		
The enclosed	I Articles of A	mendment and fee(s) are sub-	mitted for filing		
Please return	all correspond	lence concerning this matter	to the following:		
		JESUS LEON			
			Name of Person		
SACONSA GROUP LLC					
Firm/Company					
3625 NW 82 Avenue Suite 100-K					
Address					
		DORAL, FL 33166			
	City/State and Zip Code				
		JESUSLEONTERAN@G		<del></del>	
		E-mail address: (	to be used for future annual report no	ufication)	
For further a	nformation cor	acerning this matter, please or	ali		
JESUS LE	ON		786 7572436		
	Name of I	erson	Area Code Daytir	ne 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/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2001 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

H210004688013

GRUPO GERSINGERLLC			
(Name of the Limited Liability Company as it now ap (A Florida Limited Liability Company	pears on our records.) by)		
The Articles of Organization for this Limited Liability Company were filed on Florida document number <u>L21000225205</u> .	05/14/2021	and a	issigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liability company	v here:		
The new name must be distinguishable and contain the words "Limited Liability Company," t	he designation "LLC" or	the abbreviation	1. L.C."
Enter new principal offices address, if applicable:			<del></del>
(Principal office address MUST BE A STREET ADDRESS)			
			<del></del>
· · · · · · · · · · · · · · · · · · ·			
(Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office address	on our records, e	enter the name 27	
(Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office address	on our records, e		
(Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office address registered agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:	on our records, e	enter the name 27	
New Registered Office Address:		27 AM IO: 37	LED

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

To: -18506176383

H210004688013

<u>Title</u>	Name	Address	Type of Action
MGRM	Santana Becerra, Ransse R	3625 NW 82 AVE	Add
	<del></del>	SUITE 100 K	Remove
		DORAL, FL 33166	□ Change
			Add
			□ Remove
			□ Change
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			🗖 Remove
			□ Change

To: -18506176383	Page: 8 of 8	2021-12-27 20:3	7:22 GMT	17865135977	From JESUS LEON
D. If amending any of	her information, enter	change(s) here: (A	ttach additional she	eets, if necessary.)	
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(If an effective date is li Note: If the date in	other than the date of fil sted, the date must be specific serted in this block does no be date on the Department of	and cannot be prior to do at meet the applicable	te of filing or more than	(optional) 90 days after filing.) Pursuant rements, this date will not b	ιο 605,0207 (3)(b) se listed as the
If the record specification (b) The 90th day	les a delayed effectiv after the record is file	e date, but not ar ed.	effective time, a	at 12:01 a.m. on the	earlier of:
Dated	R 20	, 2021		1	$\supset$
***************************************	Signature o	a member or authorize		word?	_
<b></b>	•	History of againment			
GERAF	RDOJ SINGER YEPEZ	Typed or printed na	rite of signee		<del></del>

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