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COVER LETTER

Divis	sion of Cor	porations		, p ; *
SUBJECT:	GRUPO AN	NÁLYTICA LLC	<u>.</u> "	
SOBJECT.	· · ·	Name of Lim	ited Liability Company	
The enclosed	Articles of .	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspo	ndence concerning this matter	to the following:	
		CARMEN BRICENO		N)
			Name of Person	22 AUG
			Firm/Company	
		10600 NW 88TH ST, UNI		ت عد
			Address	
		DORAL, FL 33178		29
		•	City/State and Zip Code	
		admin2@froehlichcpa.com		
		E-mail address: (to be used for future annual report no	otification)
For further in	formation co	oncerning this matter, please c	all:	
CARMEN B	RICENO		561 795-9500 at (
	Name of	f Person		me Telephone Number
Enclosed is a	check for th	ne following amount:		
■ \$25.00 Fi	ling Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	ing Address		Street Address:	action
	istration S ision of C	orporations	Registration S Division of Co	
	. Box 632		The Centre of	

Tallahassee, FL 32314

TO:

Registration Section

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GRUPO ANALYTICA LLC				
(Name of the Limited Liability Compar (A Florida Limited L	y as it now appears on our ability Company)	records.)		
The Articles of Organization for this Limited Liability Company Florida document number <u>L21000235476</u>	were filed on <u>05/20/2021</u>	·	and assig	gned
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liabil	lity company here:			
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation	"LLC" or the abbrevia	ation "L.1,	C."
Enter new principal offices address, if applicable:			2	<u> </u>
(Principal office address MUST BE A STREET ADDRESS)			2 <u>4</u> (
			<u> </u>	### Cres
			6	<u> </u>
Enter new mailing address, if applicable:			PH	En.
			က္	-
(Mailing address MAY BE A POST OFFICE BOX)			2-	
B. If amending the registered agent and/or registered office at agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	ddress on our records,		the new	registere
		Clarida		
 -,——	City	Florida Zi	ip Code	
New Registered Agent's Signature, if changing Registered Agent:				
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office of company has been notified in writing of this change.	performance of my duti rovided for in Chapter	es, and I am famil 605, F.S. Or, if th	liar with is docun	nand nent is

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>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	ELIAS SAAP BRICENO	10600 NW 88TH STUNIT 213 DORAL, FL 33178	= Add
			□Remove
			□Change
MGR	CARMEN BRICENO	10600 NW 88TH STUNIT 213 DORAL, FL 33178	= Add
		 	□Remove
			□Change
MGR	GLADYS SOTELDO	210 BERENGER WALK	□Add
		ROYAL PALM BEACH, FL 33414	\exists Remove
			□Change
	<u> </u>		ABS 16
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			Ghange
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Sective date, if other than the dangle of the date is listed, the date must be tee: If the date inserted in this block to the date inserted on the Department's effective date on the Department's effective date.	e of filing: pecific and cannot be prior to date of filing or m loes not meet the applicable statutory filin ment of State's records.	(optional) nore than 90 days after filing.) Pursuant to g requirements, this date will not be	605.020 listed as
ecord specifies a delayed effective da is filed.	e, but not an effective time, at 12:01 a.m.	on the earlier of: (b) The 90th day a	after the
AUGUST 10	- 2022		

Filing Fee: \$25.00