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Special Instructions to F	iling Officer:	
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## **COVER LETTER**

TO:		stration Section of Corpo					
CHARLES		Amelie Grou	p LLC	•	ì	4	•
SUBJE	CI: _		Name of Lim	ited Liability Comp	pany		<del></del> -
The encl	losed	Articles of A	mendment and fee(s) are sub	mitted for filing.			
Please n	eturn a	all correspond	dence concerning this matter	to the following:			
			Julio Castro				
			<del></del>	Name of Pe	rson		
			Corporate Services Interna	itional Consulting	g Group	LLC	
				Firm/Comp	any		<del></del>
			4000 Hollywood Blvd, sui	ite 140 N			
				Address			<del></del>
			Hollywood, Fl. 33021				
				City/State and Z	ip Code		
			Admin@FinkaRealty.com				
			E-mail address: (	to be used for futur	e annual	report notific	cation)
For furth	her inf	formation cor	ncerning this matter, please c	all:			
Julio Ca	astro			954 at (	29	46046	
	·	Name of I	Person	Area C	ode	Daytime	Telephone Number
Enclose	d is a	check for the	following amount:				
■ \$25	5.00 Fi	ling Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Fili Certified (additional c	Сору		□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		ing Address: istration Se		_	itreet A	ddress: ation Sect	ion
	_	istration Se ision of Co			_	ation Sect on of Corp	
	P.O.	Box 6327	,	7	The Ce	entre of Ta	Illahassee
	Tall	ahassee, Fl	L 32314	4	2415 N	l. Monroe	Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Amelic Group LLC		
( <u>Name of the Limited Liability Compa</u> (A Florida Limited)	nny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company  Florida document number 1.21000299331	were filed on	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" o	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		708
Principal office address MUST BE A STREET ADDRESS)		10 11
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)	<del> </del>	8
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter th</u>	e name of the new regist
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Flori	
	City	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.

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	Address	Type of Action
MGR	Florida Corporate Group LLC	4000 Hollywood Blvd, suite 140 N	■Add
		Hollywood, Fl. 33021	□Remove
			□ Change
MGR	Tis Manager, LLC	4000 Hollywood Blvd, suite 140 N	□Add
		Hollywood, Fl. 33021	<b>■</b> Remove
			Change
			□Add
			Петоче
			Change
			□Add
			□Remove
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n effective	e date is listed, the d	late must be specifi	ic and cannot be prion	r to date of filing	or more than 90 d	ays after filing.) P	
			of State's records		ming requireme	ints, this tract wi	ii iidi ik iisted a
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	xifies a delayed e	ffective date, bu	t not an effective	ime, at 12:01 a	.m. on the earlie	er of: (b) The 9	Oth day after the
is filed.	tember 27th		2021				
is filed.	tember 27th		, 2021	-· ()	[* ;		
is filed.	tember 27th						
is filed.	tember 27th		of a member or auti	norized represent	at ve of a member		

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