## 121000302072

(Requestor's Name)
(Address)
(Address)
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(City/State/Zip/Phone #)
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## **COVER LETTER**

TO:

Registration Section

Division of Ca	erporations				
DOMENE	ECH GROUP, LLC				
SUBJECT:	JBJECT:Name of Limited Liability Company				
		Name of Limited Liability Company  mendment and fee(s) are submitted for filing.  Idence concerning this matter to the following:  MICHAEL DOMENECH BAENA  Name of Person  DOMENECH GROUP, LLC  Firm/Company  6949 TEMA LANE  Address  SARASOTA, FL 34241  City/State and Zip Code  MICHAELDOMENECH98@YAHOO.COM  E-mail address: (to be used for future annual report notification)  incerning this matter, please call:  BAENA  Person  41  Area Code  Daytime Telephone Number  following amount:  \$\Bigcirc{1}{2}\$\$\$\$30.00 Filing Fee & \$\Bigcirc{1}{2}\$			
The enclosed Articles o	f Amendment and fee(s) are sub-	mitted for filing.			
Please return all corresp	ondence concerning this matter	to the following:			
	MICHAEL DOMENECH	BAENA			
		Name of Person	· <del></del>		
	DOMENECH GROUP, LI	.C			
		Firm/Company			
	6949 TEMA LANE				
		Address			
	SARASOTA, FL 34241				
		City/State and Zip Code			
	E-mail uddress: (	to be used for future annual report not	ification)		
For further information	concerning this matter, please c	all:			
MICHAEL DOMENE	CH BAENA				
Name	of Person	Area Code Daytin	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)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
Mailing Addi Registration	Section	Street Address: Registration Se			
Division of P.O. Box 6	Corporations		Division of Corporations The Centre of Tallahassee		
Tallahassec			pe Street, Suite 810		

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DOMENECH GROUP, LLC				
(Name of the Limi	ited Liability Compa (A Florida Limited I	ny as it now appears or Liability Company)	our records.)	
The Articles of Organization for this Limited I. Florida document number <u>L21000302072</u>	Liability Company	were filed on 06/30/	2021	and assigned
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name of	of the limited liab	ility company here:		
N/A				
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the desig	nation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable:		N/A		
(Principal office address MUST BE A STRE.	ET ADDRESS)			
Enter new mailing address, if applicable:		N/A		25216
(Mailing address MAY BE A POST OFFICE BOX)				
				±
B. If amending the registered agent and/or agent and/or the new registered office address.		address on our reco	rds, <u>enter the nam</u>	e of the new registere
Name of New Registered Agent:	N/A			
New Registered Office Address:	6949 TEMA L			
		Enter Florida	street address	_
	SARASOTA		, Florida <sup>34</sup>	241
	<del></del>	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 heing 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

<u> Title</u>	<u>Name</u>	Address	Type of Action
AMBR	MICHAEL DOMENECH BAENA	6949 TEMA LANE	■Add
		SARASOTA, FL 34241	□Remove
			□ Change
MGR	MICHAEL DOMENECH BAENA	6494 TEMA LANE	□Add
	-	SARASOTA, FL 34241	<b>≡</b> Remove
			□Change
			DAdd
			□Remove
			☐ Change
			□Add
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N/A						
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fective date, if other than in effective date is listed, the date	e must be specific a	and cannot be prior	to date of filing or	more than 90 days a	ptionar) after filing.) Pursuant i	to 605,0201
<u>ote:</u> If the date inserted in th	iis block does not	t meet the applic	able statutory fi	ing requirements.	this date will not b	e listed as
ocument's effective date on t	he Department of	f State's records.	•			
ecord specifies a delayed eff	ective date, but n	iot an effective ti	me, at 12:01 a.n	n, on the earlier of	f: (b) The 90th day	after the
is filed.						
		2021				
SEPTEMBER 27			<del>_</del>			
september 27		_ A A	4_			
SEPTEMBER 27		M	2			
ated SEPTEMBER 27		a member auth	orized representat	eve of a member		
MICHAEL DOME	Signature of	a member of auth	orized representat	ive of a member		_

Filing Fee: \$25.00