Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000222080 3)))



H230002220603ABCT

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : SUNBIZ ONLINE LLC
Account Number : I20210000128
Phone : (305)244-9500
Fax Number : (954)827-9354

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_____

UN Z I FR 3: ZG BIMENT OF STATE BIGF CORFORATION AHASSEE. FLORIDA

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN GRUPO BG INTERNATIONAL LLC

Certificate of Status	0
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Corporate Filing Menu

Help

T. LEMIEUX

JUN 2 2 2023

COVER LETTER

TO: Registration Se Division of Cor			
, our recom	·	NTERNATIONAL LLC	
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fec(s) are sub	omitted for filing.	
Please return all correspo	endence concerning this matter	to the following:	
		RODRIGO URBINA	
		Name of Person	
		SUNBIZ ONLINE LLC	
		Firm/Company	
	1401 SAWG	RASS CORPORATE PK	WY. SUITE 200
		Address	
		SUNRISE, FL 33323	
		City/State and Zip Code	
		to be used for future annual r	
For further information c	oncerning this matter, please c		epot nouncement,
RODRIC	GO URBINA	305 at ()	244-9500
Name o	f Person	Area Code	Daytime Telephone Number
Enclosed is a check for the	ne following amount:		
\$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is encl	Certificate of Status &
Mailing Address Registration S	Section	_	tion Section
Division of Corporations		_	of Corporations

P.O. Box 6327 Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GRUPO BG II	NTERNATIONAL LLC	•		
(<u>Name of the Limited Liability Co</u> (A Florida Limi	mpany as it now appears ted Liability Company)	on our records.)		
The Articles of Organization for this Limited Liability Comp	any were filed on	04/05/2023	and as	signed
Florida document numberL23000170558				
This amendment is submitted to amend the following:				
A. If amending name, <u>enter the new name of the limited l</u>	iability company her	<u>e</u> :		
The new name must be distinguishable and contain the words "Limited L	iability Company," the des	signation "LLC" or the	abbreviation "L	.L.C."
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRESS	<u></u>			
Enter new mailing address, if applicable:				
Mailing address MAY BE A POST OFFICE BOX)				
			·	····
			£2ù	
B. If amending the registered agent and/or registered offi	ce address on our rec	cords, <u>enter the na</u>	me of the ne	w registe
agent and/or the new registered office address here:			 	
			. —	• •
Name of New Registered Agent:			. P.	
New Registered Office Address:			<u> </u>	
rea registere office autress.	Enter Florid	la street address	~ ~	• • • • • • • • • • • • • • • • • • • •
		, Florida		
	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>	<u>Name</u>	Address	Type of Action
MGR	SOLIMAR ARGUELLO	1401 SAWGRASS CORPORATE PKWY	= Add
		SUITE 200	□Remove
		SUNRISE, FL 33323	
			Remove
			Change
			□Add
			Remove
			□Change
 -			□Add
	 	□Remove	
			☐ Change
			🗆 Add
			□ Remove
			Change
			□Add
		□ Remove	
			Change

•	•	enter change(s) here: (Attach additiona	, s
<u></u>			
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(If an effective da <u>Note:</u> If the d	e, if other than the date on the is listed, the date must be spe ate inserted in this block do fective date on the Departm	ecific and cannot be prior to date of filing or more to see not meet the applicable statutory filing re	(optional) than 90 days after filing.) Pursuant to 605.0207 (3) quirements, this date will not be listed as the
If the record specificecord is filed.	ies a delayed effective date,	but not an effective time, at 12:01 a.m. on t	he earlier of: (b) The 90th day after the
Dated	JUNE 21	2023	
	Signati	ure of a member or authorized representative of a	n member
	•	JHON E BENITEZ	
		Typed or printed name of signee	

Filing Fee: \$25.00