L24000105391

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(· · · · · · · · · · · · · · · · · · ·
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
:

Office Use Only



100430174731

95/22/24--01025--005 ++25.00



COVER LETTER

то:	Registration Se Division of Cor			
SUBJEC	BLG Group			
SUBJEA	7T:	Name of Lin	ited Liability Company	
The encl	osed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please re	eturn all correspo	ondence concerning this matter	to the following:	
		Maria C Perez		
			Name of Person	
		Paz Accounting Company		
			Firm/Company	
		6401 SW 87 Avenue Suite	114	
			Address	
		Miami FL 33173		
			City/State and Zip Code	
		maria@pazaccounting.com	to be used for future annual report noti	(ication)
For furth	er information c	oncerning this matter, please c		included,
Reginald	l Beliard		305 492-5167	
	Name o	f Person		e Telephone Number
Enclosed	l is a check for th	ne following amount:		
≡ \$2 5.0	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 Addres Registration 5		<u>Street Address:</u> Registration Se	ction
	Division of C		Division of Cor	

P.O. Box 6327

Tallahassee, FL 32314

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street. Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BLG Group ELC		
(<u>Name of the Limited Li</u> (入下)	ability Company as it now appears on o orida Limited Liability Company)	ur records.)
The Articles of Organization for this Limited Liabiliforida document number $\frac{L24000105391}{L24000105391}$	ty Company were filed on May 1, 2	024, and assigned
This amendment is submitted to amend the following	ā:	
A. If amending name, enter the new name of the	limited liability company here:	
The new name must be distinguishable and contain the words	"Limited Liability Company," the designat	ion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET AL	DDRESS)	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX	2	
B. If amending the registered agent and/or regist- agent and/or the new registered office address her		s, enter the name of the new registere
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida stre	vet address .
_		Florida Zip Code
	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 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>	Name	<u>Address</u>	Type of Action
AMBR	Luis M Fernandez	5439 NW 72 Avenue	🗀 Add
		Miami FL 33166	■Remove
			Change
		 	□Add
			□Remove
			Change
			Remove
			Change
			□Add
			□Remove
			Change
			□Add
			Remove
			□ Change
			□Add
			Remove
			□Change

		· · · · · · · · · · · · · · · · · · ·			- -
					
March 1, 2024.		March 1	2024		
March 1, 2024. Ctive date, if other than the date of filing: (ontional)	tive date if other than the d	March 1.	2024.	(onti	ional)
ctive date, it other than the date of filing: (optional)	tive date, if other than the d	ate of filing:		(opti	ional)
ctive date, it other than the date of filing: (optional)	tive date, if other than the d	ate of filing:		(opti	ional)
ctive date, if other than the date of filing: March 1, 2024. effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020	tive date, if other than the d	ate of filing:		(opti	ional)
ctive date, it other than the date of filing: (optional)	tive date, if other than the d	ate of filing:		mon than 90 days after	ional)
ctive date, it other than the date of filing: (optional)	tive date, if other than the d	ate of filing:		(opti	ional)
ctive date, if other than the date of filing: (optional)	tive date, if other than the d	ate of filing:		(opti	ional)
March 1, 2024. Ctive date, if other than the date of filing: (ontional)	tive date, if other than the d	March 1,	2024.	(onti	ional)
March 1, 2024.		March 1	2024.		
NA 1 1 2002					
	· · · · ·				
					
					
		·		···	
				-	
				• •	
			-		

Filing Fee: \$25.00