



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.

((H23000257411 3)))



H230002574113ABCZ

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:  
Division of Corporations  
Fax Number : (850)617-6383

From:  
Account Name : LAZARUS CORPORATE FILING SERVICE, INC.  
Account Number : I20000000019  
Phone : (305)552-5973  
Fax Number : (305)675-5944

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

Email Address: \_\_\_\_\_

RECEIVED

2023 JUL 24 PM 3:27

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
SEVENTY FIVE GROUP

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

2023 JUL 24 PM 4:07

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SEVENTY FIVE GROUP

(Name of the Limited Liability Company as it now appears on our records) (A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 08/31/2022 and assigned Florida document number L22000384313

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

N/A

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

343 PLUMOSO LOOP

(Principal office address MUST BE A STREET ADDRESS)

DAVENPORT FLORIDA 33897

Enter new mailing address, if applicable:

343 PLUMOSO LOOP

(Mailing address MAY BE A POST OFFICE BOX)

DAVENPORT FLORIDA 33897

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

JIMMY SALAZAR

New Registered Office Address:

343 PLUMOSO LOOP

Enter Florida street address

DAVENPORT

City

Florida

33897

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.

Jimmy Salazar

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>	<u>Type of Action</u>
MGR	JIMMY SALAZAR	343 PLUMOSO LOOP	<input type="checkbox"/> Add
		DAVENPORT FLORIDA 33897	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	VALENTINA MONCAYO	343 PLUMOSO LOOP	<input type="checkbox"/> Add
		DAVENPORT FLORIDA 33897	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

