

K14000121167

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

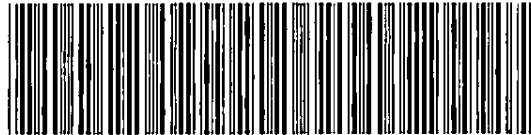
(Business Entity Name)

(Document Number)

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T.G.
(4/18/19)



115 N CALHOUN ST., STE. 4
TALLAHASSEE, FL 32301
P: 866.625.0838
F: 866.625.0839
COGENCYGLOBAL.COM

Account#: I20000000088

Date: 04/17/2019

Name: Merritt Walker

Reference #: 1071419

Entity Name: MUMI, LLC

- Articles of Incorporation/Authorization to Transact Business
- Amendment
- Change of Agent
- Reinstatement
- Conversion
- Merger
- Dissolution/Withdrawal
- Fictitious Name
- Other _____

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Authorized Amount: \$ 25

Signature: mw

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

MUMI, LLC

(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 August 1, 2014 and assigned
Florida document number L14000121167.

This amendment is submitted to amend the following:

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 designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

1951 NW 7th Ave

6th Floor

Miami, Florida 33136

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1951 NW 7th Ave

6th Floor

Miami, Florida 33136

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: _____

New Registered Office Address: _____

Enter Florida 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 Changing Registered Agent, Signature of New Registered Agent

In 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	Gabriela Mekler	1130 NE 91st Terrace	<input type="checkbox"/> Add
		Miami Shores, Florida 33138	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	Maribel Moreno	600 Grapetree Drive	<input type="checkbox"/> Add
		Apt 5GN	<input type="checkbox"/> Remove
		Key Biscayne, Florida 33149	<input checked="" type="checkbox"/> Change
MGR	Joel Minski	1815 Griffin Road	<input checked="" type="checkbox"/> Add
		#404	<input type="checkbox"/> Remove
		Dania Beach, Florida 33004	<input type="checkbox"/> Change
MGR	David Anchislavsky	1951 NW 7th Ave	<input checked="" type="checkbox"/> Add
		6th Floor	<input type="checkbox"/> Remove
		Miami, Florida 33136	<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

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