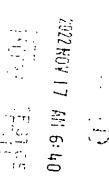
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	·

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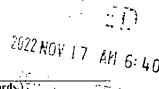
A. BUTLER FEB = 3 2023

COVER LETTER

	M.L.G. MORC	OCCAN LIQUID GOLD, L	LC
SUBJECT:		nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
		MAURICE BROWN	
		Name of Person	
	M.L.,G	, MOROCCAN LIQUID O	OLD, I.I.C
		Firm/Company	
	430	00 BISCAYNE BLVD, SUI	TE 203
		Address	
		MIAMI, FL. 33137	
		City/State and Zip Code	
	F-mail address: (m.bahiij@mlgimports.co (to be used for future annual re	
For further information c	oncerning this matter, please c		,
	CE BROWN	305	967-5473
	f Person	at () 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 enclosed)	□ \$60.00 Filing Fee. Certificate of Statu sed) Certified Copy (additional copy is encl
			an example to
Mailing Address Registration 5		<u>Street Add</u> Registrati	
Mailing Addres Registration 5 Division of C P.O. Box 632	Section Corporations	Registrat Division	ion Section of Corporations re of Tallahassee

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



M.L.G. MOROCCAN	LIQUID GOLD, I	LC LC	17 AH 6:40	
(Name of the Limited Liability Compa (A Florida Limited	iny as it now appear Liability Company)	s on our records.)	17 AH 6:40	
The Articles of Organization for this Limited Liability Company Florida document numberL 16000218903	were filed on	APRIL 22, 2022	_ and assigned	
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	ility company he	re:		
M.L.G. MOROCCAN LIQUI	D GOLD IMPORT	S. LLC		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the de	esignation "LLC" or the abbre	viation "L.L.C."	
Enter new principal offices address, if applicable:	4300 BISCAYNE BLVD, SUITE 203			
(Principal office address MUST BE A STREET ADDRESS)	MIAMI, FL. 33	137		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	9101 NW 7TH A MIAMI, FL. 331	VE., SUITE A-7		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our re	cords, <u>enter the name c</u>	of the new registo	
Name of New Registered Agent:				
New Registered Office Address:	Enter Flori	da street address		
	12/11/27 7 467 1	THE THE SECTION AND SECTION ASSESSMENT AND SECTION ASSESSMENT ASSE		
	City	, Florida	Zip Code	
	Cúv		гір Соне	

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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

Title	<u>Name</u>	Address	Type of Action
AMBR	MAURICE EUGENE BROWN LL	4300 BISCAYNE BLVD, SUITE 203	= Add
		MIAMI, FL. 33137	□Remove
			□Change
AMBR	ASKIA KEITA	1860 VENICE PARK DR. APT 226	≣Add
		MAMI, FL. 33181	
			☐ Change
-			🗆 Add
			□Remove
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cord specific	es a delayed effectiv	e date, but no	t an effective (time, at 12:0	La.m. oπ the o	earlier of: (b)	The 90th o	lay after th
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Filing Fee: \$25.00