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T. MATTHEWS DEC 20 2021

COVER LETTER

Tallahassee, FL 32314

TO:		ration Sec on of Corp			
SUBJEC	cт.	MAYER	investments canada li	l.C	
SUBJEC	JI; <u> </u>		Name of Limi	ted Liability Company	
The encl	losed A	rticles of A	Amendment and fee(s) are sub-	nitted for filing.	
Please re	eturn al	l correspon	adence concerning this matter	to the following:	
			Ryan Robertson		
				Name of Person	
			Altro LLP		
				Firm/Company	
			155 University Avenue, Su	ite 300	
				Address	
			Toronto, Ontario, Canada,	M5H 3B7	
				City/State and Zip Code	
			rrobertson@altrolaw.com	o be used for future annual repo	et notification)
For furth	ner info	rmation co	ncerning this matter, please ca	-	
		Ryan Rob	ertson	at (416)	477-8165
		Name of	Person		Daytime Telephone Number
Enclosed	d is a cl	neck for the	e following amount:		
□ \$ 25.	.00 Fili	ng Fee	☐ \$30.00 Filing Fee & Certificate of Status	■ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
		ı <u>g Address</u>		Street Addre	
	-	tration Solion of Co	ection orporations	Registratio Division o	n Section f Corporations
		Box 6327	•		of Tallahassee

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION . OF

21 CEO - 1 P.1 3: 32

MAYER INVESTMENTS CANADA LLC

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

(A Florida Limited Liability Company)

(A Florida Ellinica i	natinty Company)	
The Articles of Organization for this Limited Liability Company	were filed on <u>03/03/202</u>	21 and assigned
lorida document number <u>L21000109713</u> .		
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designat	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
Unduring address MAT BE A FOST OFFICE BOAT		
agent and/or the new registered office address here: Name of New Registered Agent:		
New Registered Office Address:		
New Registered Office Address.	Enter Florida stre	et address
		Florida
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agrouped provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as propertied to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my di provided for in Chapte	ities, and I am familiar with and er 605, F.S. Or, if this document is
If Char	nging Registered Agent, Sig	nature 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>	Type of Action
MGR	GARTEN, IRVING	36 LOWTHER AVENUE	
		TORONTO, ONTARIO, M5C 2T6	■Remove
			□ Change
			□Add
			□Remove
			□ Change
			□Add
			□Remove
			□ Change
			DAdd
			□Remove
			□ Change
			□Add
			□Remove
			□Change
			□Add
		_ _	□Remove
			□ Change

If amend	ling any other information, enter change(s) here: (Attach additional sheets, if necessary.)
-	
_	· · · · · · · · · · · · · · · · · · ·
-	
Note: If	te date, if other than the date of filing:
he record s ord is filed	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	December 6
	/s/ Irving Garten
	Signature of a member or authorized representative of a member
	IRVING GARTEN Typed or printed name of signee

Filing Fee: \$25.00