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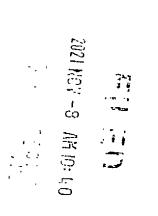
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COVER LETTER

TO:

Registration Section Division of Corporations

Tallahassee, FL 32314

SUBJECT: MIA OUTL	AWSTIC		
SUBJECT: MIN OUTE		ited Liability Company	
The analogued Amilabas of A	A and for(a) are such	mitted for filing	
The enclosed Afficies of A	Amendment and fee(s) are sub	mided for fiting.	
Please return all correspon	ndence concerning this matter	to the following:	
	Matias Gabriel Diaz		
		Name of Person	
		Firm/Company	
		· · · · · · · · · · · · · · · · · · ·	
	9732 sw 145 pl		
		Address	
	Miami FL 33186	City/State and Zip Code	
	maatiasdiaz@gmail.com		
	F-mail address: (to be used for future annual report notif	fication)
For further information co	oncerning this matter, please ca	all:	
Matias Diaz Name of	Person	at (786) 2050655 Area Code Daytime	e Telephone Number
rame of	1 0/30/1	Area Code Dayina	reteptione Nutrice
Enclosed is a check for the	e following amount:		
☐ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy	(1) \$60.00 Filing Fee, Certificate of Status &
	Cermicate of Status	(additional copy is enclosed)	Certified Copy
			(additional copy is enclosed)
Nata tit A.a.A	_	C	
<u>Mailing Address</u> Registration S		<u>Street Address:</u> Registration Sec	ction
Division of Co		Division of Con	
P.O. Box 6327	-	The Centre of T	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MIA OUTLAWS LLC	- 1091.NOV - 0 - 40
(Name of the Limited Liability Company as it now appear (A Florida Limited Liability Company)	s on our records:) = 3 //// []: [; 0
,	
The Articles of Organization for this Limited Liability Company were filed on Ser	stember 15, 2021 and assigned
Florida document number <u>L21000409223</u>	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company he	<u>re</u> :
The new name must be distinguishable and contain the words "Limited Liability Company," the de-	signation "L.L.C" 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)	
D. If amounting the registered agent and/or registered office address on our re-	
B. If amending the registered agent and/or registered office address on our reagent and/or the new registered office address here:	cords, enter the name of the new registere
Name of New Registered Agent:	
New Registered Office Address:	
Enter Flori	da street address

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.

City

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>	Address	Type of Action
AMBR	Matias G. Diaz	9732 sw 145 pl	= Add
		Miami FL 33186	□Remove
		US	□Change
AMBR	Israel F Victorero	13026 sw 68th ln	
		Miami FL 33183	Remove
		US	🗏 Change
		□Add	
			🗀 Remove
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l'ffoct	ve date, if other than the date of filing: (optional)
lf an eff Note:	ective 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 605,0207 (If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as t ent's effective date on the Department of State's records.
e recor ord is fi	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the ed.
Dated	November 3
	1/1
	Signature of a member or authorized representative of a member

Typed or printed name of signee