6/6/23, 3:29 PM

Division of Corporations



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : E & F LATIN GROUP LLC

Account Number : I20160000049 Phone : (954)384-8565 Fax Number : (954)302-4976

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COVER LETTER

TO: Registration S Division of Co			
* INVERSION	DNES MIG [®] USA LLC	•	*
SUBJECT:	Name of Lin	uted Liability Company	
The enclosed Articles of	Amendment and Gofs) are sub	omitted for filing	
		-	
Trouse retain an corresp.	ondence concerning and matter	to the rottowing.	
	DIEGO FIGUEROA		
	RSIONES MIGUSA LLC Name of Limited Liability Company es of Amendment and fee(s) are submitted for filing. respondence concerning this matter to the following: DIEGO FIGUEROA Name of Person E & F LATIN GROUP LLC Firm/Company 1820 N CORPORATE LAKES BLVD SUITE 109 Address WESTON, FL 33326 City/State and Zip Code diego@eflatinaccounting.com Benefit address: (to be used for future annual report notification) tion concerning this matter, please call: A 954 384 8565 and of Person A 1954 384 8565 Daytime Telephone Number for the following smount: ee \$30.00 Filing Fee & \$555.00 Filing Fee & \$Certificate of Status & \$Certified Copy (additional copy is enclosed) diffess: ion Section of Corporations Sitest Address: Registration Section Division of Corporations		
	E & F LATIN GROUP LI	.C	s60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Interestions ES MIGUSA LLC Name of Limited Liability Company Interest and Estation of Person E & F LATIN GROUP LLC Firm/Company 1820 N CORPORATE LAKES BLVD SUITE 109 Address WESTON, FL 33326 City/State and Zip Code diago@cflatinaccounting.com E-mail address: (to be used for future annual report notification) cerning this matter, please call: 954 Area Code Daytime Telephone Number following amount: \$\int \text{330.00 Filing Fee & Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)} \$Sireet Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		
	1820 N CORPORATE LA	KES BLVD SUITE 109	
		Address	
	WESTON, FL 33326		
			on)
For further information of		·	
DIEGO FIGUEROA			
Name o	of Person	Area Code Daytime Teli	ephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy
Malling Address Registration of Control Division of Control Divisi	Section Corporations 27	Registration Section Division of Corpora The Centre of Talla	itions hassee reet, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

INVERSIONES MJG USA LLC	
(Name of the Limited Liability Compa (A Florida Limited)	iny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number L22000220549 This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
The new name must be distinguishable and contain the words "Limited Liebi	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	2665 EXECUTIVE PARK DRIVE
(Principal office address MUST BE A STREET ADDRESS)	STE 2 WESTON FL. 33331
	WESTON FL. 33331
Enter new mailing address, if applicable:	2665 EXECUTIVE PARK DRIVE STE 2
(Mailing address MAY BE A POST OFFICE BOX)	WESTON FL. 33331
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the name of the new registered</u>
N. C. P. L.	₩ _₩ , 2
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida
	City — Zip Gode
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document is

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>	Name	Address	Type of Action
MGR	GERMAN ALBERTO LOPEZ ARAGON	2665 EXECUTIVE PARK DRIVE	□Add
		STE 2	□Remove
		WESTON FL. 33331	☐ Change
MGR	EDID MAYERLY BONILLA CANDIL	2665 EXECUTIVE PARK DRIVE	□Add
		STE 2	□Remove
		WESTON FL. 33331	
		······································	□Add
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he record of ord is filed		e dote, but not an effective time, at 12	:01 a.m. on the earlier of: (b) The 90th day	after the
Dated	June 6	2023		
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