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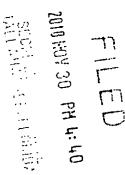
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COVER LETTER

Division of Corporations MANCINI INTERNATIONAL LLC SUBJECT: Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: DANIEL C MANCINI Name of Person MANCINI INTERNATIONAL LLC Fimt/Company 3100 SW 15th STREET Address DEERFIELD BEACH, FL 33442 City/State and Zip Code dmancini@ric-manfl.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: **Rusty Ewing** Daytime Telephone Number Name of Person Enclosed is a check for the following amount: □ \$25.00 Filing Fee **■** \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

(additional copy is enclosed)

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TOARTICLES OF ORGANIZATION **OF**

MANCINI INTERNATIONAL 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 $\frac{02/01/2007}{1}$ and assigned Florida document number L07000011991 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 "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 7464 19 MILE ROAD Enter new mailing address, if applicable: STERLING HEIGHTS, MI 48314 (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the iname registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida 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.

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

Title	<u>Name</u>	Address	Type of Action
MGRM	MANCINI, STEVEN MTRUSTEE		
		42600 R. MANCINI DRIVE. STERLING HEIGHTS, MI 48314	■ Remove
			Change
MGRM	MANCINI, EDWARD ATRUSTEE		
			Remove
		7464 19 MILE ROAD STERLING HEIGHTS, MI 48314	Change
		·	Add
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ote: If the date inserted in this blo	ck does not meet	the applicable	statutory filing r	equirements, this da	ite will not be listed as
ocument's effective date on the De	partment of State	s records.			
record specifies a delayed	effective date	but not a	n effective tim	e at 12:01 a m	on the earlier of
The 90th day after the reco		, , , , , , , , , , , , , , , , , , , ,		o, et 12.01 a	,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
November 29	2(018			
November 29,	,				
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00