

L110000 92332

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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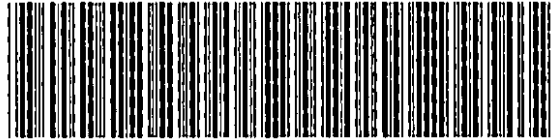
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2019 JUN 28 PM 1:54

NICOLE J. HUESMANN, P.A.

Attorney at Law

150 Alhambra Circle, Suite 1150
Coral Gables, Florida 33134
Phone (305) 858-0220
Fax (305) 854-6810
njhuesmann@njhlaw.com

June 25, 2019

VIA REGULAR MAIL

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: Articles of Amendment to Articles of Organization

**Name of Company: MARK S. SCOTT, P.L.
Document Number L09000113844**

**Name of Company: MSS International Consultants LLC
Document Number L11000092332**

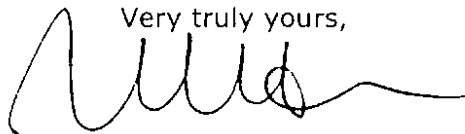
To Whom it May Concern:

Please find enclosed the following for filing the above referenced companies:

- Original Cover Letters
- Original Executed Articles of Amendment
- Check No. 5630 for the amount of Fifty Dollars (\$50.00) for the filing fee for both companies.

Please confirm completion of both. Should you require anything further or have any questions, please do not hesitate to contact us.

Very truly yours,



Nicole J. Huesmann

NJH/dp
Enclosures

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MSS International Consultants LLC

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:

Nicole J. Huesmann, Esq.

Name of Person

Nicole J. Huesmann, P.A.

Firm/Company

150 Alhambra Circle, Suite 1150

Address

Coral Gables, FL 33134

City/State and Zip Code

njhuesmann@njhlaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Nicole Huesman

305 888-0200
at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|--|--|--|--|

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

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

MSS International Consultants LLC

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

2019 JUN 28 PM 1:54

The Articles of Organization for this Limited Liability Company were filed on 08/11/2011 and assigned
Florida document number L11000092332.

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 "L.L.C."

Enter new principal offices address, if applicable:

2525 Ponce De Leon Blvd., #300

(Principal office address MUST BE A STREET ADDRESS)

Coral Gables, FL 33134

Enter new mailing address, if applicable:

2525 Ponce De Leon Blvd., #300

(Mailing address MAY BE A POST OFFICE BOX)

Coral Gables, FL 33134

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Mark S. Scott, P.L.

New Registered Office Address:

2525 Ponce De Leon Blvd., #300

Enter Florida street address

Coral Gables

Florida 33134

City

Zip Code

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Mark S. Scott	2525 Ponce De Leon Blvd., #300	<input type="checkbox"/> Add
		Coral Gables, FL 33134	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

[illegible]

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective 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 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated June 18, 2019

Signature of a member or authorized representative

Signature of a member or authorized representative of a member

Mark S. Scott

Typed or printed name of signee