LICOIDADS

(Requestor's Name)					
(Address)					
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PICK-UP WAIT MAIL					
(Business Entity Name)					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					

Special Instructions to Filing Officer:

L. SELLERS

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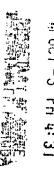
EXAMINER

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COVER LETTER

TO:	Registration Section Division of Corporations			
SUBJE	r: Mundi Business and Services LLC			
	Name of Limited Liability Company			
The enc	sed Articles of Amendment and fee(s) are submitted for filing.			
Please r	urn all correspondence concerning this matter to the following:			
	Lerida Aguilar Rondon			
Name of Person				
	Mundi Business and Services LLC			
Firm/Company				
	5512 Paradise Cay Circle			
	Address			
	Kissimmee, FL 34746			
	City/State and Zip Code			
	valbejar@bellsouth.net E-mail address: (to be used for future annual report notification)			
For furt	er information concerning this matter, please call:			
	Lerida Aguilar Rondon at (407) 952-5821 Name of Person Area Code & Daytime Telephone Number			
	Name of Felson			
Enclose	is a check for the following amount:			
₹ \$25.	Filing Fee \$\ \text{S30.00 Filing Fee & Certificate of Status} \text{Certified Copy (additional copy is enclosed)} \$\ \text{S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)} \text{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

Mundi Business and Services LLC			
(Name of the Limited Liability Company as it now appears on our recon (A Florida Limited Liability Company)	(US.)		
The Articles of Organization for this Limited Liability Company were filed on09/21/20 Florida document numberL11000108103)11	and assi	gned
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 end with the words "Limited Liability Company," the design "L.L.C."	nation "LLC	or the al	obreviation
Enter new principal offices address, if applicable:			····-
(Principal office address MUST BE A STREET ADDRESS)			
	<u></u>	·	
Enter new mailing address, if applicable:		_	
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered office address on our records, registered agent and/or the new registered office address here:	enter the	name of	the ne
	nd of particular states of the		
Name of New Registered Agent:			47.4
New Registered Office Address:	3	440:	(722-1808) (721-1808)
Enter Florida st	reet add <u>r</u> es	r P	TT.
, Flo	rida <u> ida</u>	Zin Code	T waster
·	LEAT CVI	The Conte	
New Registered Agent's Signature, if changing Registered Agent:	محتلة		

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 608, 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 amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR =	Manager	
MGRM	= Managing	Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Manuel R Perdomo Melend	5512 Paradise Cay Circle Kissimmee, Fl. 34746	Add Remove
MGRM_	Lerida de la Coromoto	5512 Paradise Cay Circle Kissimmee, FL 34746	Add Remove
MGRM_	Ricardo Perdomo	5512 Paradise Cay Circle Kissimmee, Fl 34746	Add Remove
MGRM_	Lerida Aguilar Rondon	5512 Paradise Cay Circle Kissimmee, FL 34746	✓ Add Remove
	 		Add Remove
· · · · · · · · · · · · · · · · · · ·			Add Remove
D. If amend	ling any other information, enter chang	e(s) here: (Attach additional sheets, if necessary.)	
			-
_			
Dated		www	
		da Aguilar Rondon / or printed name of signce	
	\	V Dame 2 -62	

Page 2 of 2

Filing Fee: \$25.00