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Florida Department of State Division of Corporations

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COVER LETTER

	gistration Se Vision of Co			
SUBJECT:		MN	MG, LLC	·
SUBJECT:			ted Liability Company	
The enclose	d Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return	n all correspo	andence concerning this matter	to the following:	
	,		Kevin Hagen	
			Name of Person	
		<u> </u>	łagen & Hagen, P.A.	
			Firm/Company	
3531 Griffi			3531 Griffin Road	
		-	Address	
		Ft. La	auderdale, Florida 333	312
			City/State and Zip Code	
		KHag E-mail address: (1	en@HagenLawFirm.c	OFFI rt notification)
For further i	nformation (concerning this matter, please o		
	к	evin Hagen	at (954)	987-0516
	Name o	f Person	Area Code & 1	Daytime Telephone Number
Enclosed is	a check for t	he following amount:		
▼ \$ 25.00 F	Piling Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is en	Certificate of Status & Cortificate Copy (additional copy is enclosed)
	Regist Divisio P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 assec, FL 32314	Registration Division of C Clifton Build	Corporations

Tallahassee, FL 32301

H12060070132

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION \mathbf{OF}

	MMMG, LLC			
(Name of the Limited Lia (A Flo	bility Company as it now apper ride Limited Liability Company)	er on our records.)		
The Articles of Organization for this Limited Liabil Florida document numberL1200000943	· • • • • • • • • • • • • • • • • • • •	January 20, 2012 and assig	ned .	
This amendment is submitted to amend the following	ng:			
A. If smending name, enter the new name of the	limited liability company he	erė:		
The new name must be distinguishable and end with the "L.L.C."	e words "Limited Liability Comp	vany," the designation "LLC" or the ab	breviation	
Enter new principal offices address, if applicable	:			
(Principal office address MUST BE A STREET A	DDRESS)			
<u> </u>				
		• · · · · · · · · · · · · · · · · · · ·		
Enter new mulling address, if applicable:				
Mailing address MAY BE A POST OFFICE BOX	KQ			
			·	
B. If amending the registered agent and/or registered agent and/or the new registered office Name of New Registered Agent:		our records, enter the name of	the new	
New Registered Office Address:				
	Enter Florida street address			
		, Florida	<u>.</u>	
	Clty	Zlp Code	2	
New Registered Agent's Signature, if changing Regis	ttered Agent:		IZ MAR	
I hereby accept the appointment as registered ag the provisions of all statutes relative to the prope accept the obligations of my position as registere being filed to merely reflect a change in the regis company has been notified in writing of this chai	er and complete performance ed agent as provided for in C stered office address, I hereb	of my duties, and I am familiar w Chapter 608, F.S. Or, if this docum	ent iss o; cs	
	If Changing Registored Ag	ent, Signature of New Registered Agent	— ? ^	

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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:

<u> Fitle</u>	<u>Name</u>	Address	Type of Action
MgrM	Mike, M	3531 Griffin Road Et Lauderdale, Florida 33312	Add 7 Remove
<u>MgrM</u>	Mobile Mike Promotions, Inc.	PO Box 820444 S. Florida, Florida 33082	Add ☐ Remove
			Add Remove
			AddRemove
·····			Add Remove
	,		Add Remove
). If amend	ling any other information, enter change	e(s) here: (Attach additional sheets, if necessar	ν)
, -			12 MAR 16
Pated	Myd 16 , 201	<u>~</u> .	CORPORATION AM 6: 56
		braphorized representative of a member M Mile Mile Franks I.a. or printed name of signee	(A)

03/16/2012 15:27 305639696

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Filing Fee: \$25.00