

L12000099263

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100240475801

10/17/12--01022--017 **25.00

APPROVED
AND
FILED
12 OCT 17 PM 1:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE
OCT 18 2012
EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MSW ASSETS 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:

ROOSEVELT MCCLAIN-SALTER
Name of Person

MSW ASSETS LLC
Firm/Company

913 VILLA CIR.
Address

BOYNTON BEACH FL 33435
City/State and Zip Code

OPS@MSWASSETS.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ROOSEVELT MCCLAIN-SALTER at (772) 708 1586
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

12 OCT 17 PM 1:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

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

MSW ASSETS 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 8/1/2012 and assigned Florida document number L12000099263.

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 designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

12 OCT 17 PM 1:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

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: ROOSEVELT MCCLAIN-SALTER

New Registered Office Address: _____

Enter Florida street address

_____, Florida _____
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 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 Changing Registered Agent, Signature of New Registered Agent

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>	<u>Address</u>	<u>Type of Action</u>
MGRM	ROOSEVELT MCCLAIN-SALTER	913 VILLA CIR BOYNTON BEACH FL 33435	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	VINCLA WILSON	913 VILLA CIR BOYNTON BEACH FL 33435	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	MSW ASSETS MANAGEMENT, LLC	913 VILLA CIR BOYNTON BEACH FL 33435	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

Dated OCTOBER 14, 2022

Signature of a member or authorized representative of a member

ROOSEVELT MCCLAIN-SALTER

Typed or printed name of signee

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12 OCT 17 PM 1:07

APPROVED
AND
FILED