

h12000146130

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

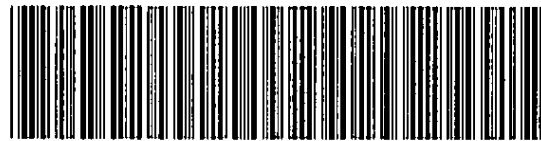
(Business Entity Name)

(Document Number)

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FILED
2022 APR -5 AM 11:02
SECRETARY OF STATE
TALLAHASSEE, FL

A. BUTLER

APR 19 2022

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MAXTISOL 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:

BARILARO, NATALIA

Name of Person

Firm/Company

3340 NE 190th ST #109

Address

AVENTURA - FL - 33180

City/State and Zip Code

nbarilaro@outlook.com

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

For further information concerning this matter, please call:

BARILARO, NATALIA

786 955-7956
at (_____) _____
Area Code Daytime Telephone Number

Name of Person

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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

FILED

MANTISOL LLC

2022 APR -5 AM 11:02

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

SECRETARY OF STATE
TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on 11/20/2012 and assigned
Florida document number L12000146130.

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:

3340 NE 190th ST

(Principal office address MUST BE A STREET ADDRESS)

#109

AVENTURA - FL - 33180

Enter new mailing address, if applicable:

3340 NE 190th ST

(Mailing address MAY BE A POST OFFICE BOX)

#109

AVENTURA - FL - 33180

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:

BARILARO, NATALIA

New Registered Office Address:

3340 NE 190th ST #109

Enter Florida street address

AVENTURA

Florida 33180

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.

Natalia Barilaro

If Changing Registered Agent, Signature of New Registered Agent

[illegible]

[illegible]

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.

Dated 03/24, 2022

Typed or printed name of signee

Filing Fee: \$25.00