Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : GILMAN CIOCIA INC.

Account Number : 120120000051

: (305)937-7773

Fax Number

: (815)301-2897

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MUST AIR USA, LLC

Certificate of Status	0
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Help JUN 17 2020

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

(Name of the Limi	ed Liability Company as it now apper (A. Florida Linuted Liability Company)	ars on our records.)	
The Articles of Organization for this Limited L Florida document number <u>L12000154847</u>		2/11/2012 and assigned	
This amendment is submitted to amend the foll	owing:		
A. If amending name, enter the new name of	f the limited liability company l	<u>sere</u> :	
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 applic	able:		
(Principal office address MUST BE A STREE	T ADDRESS)	والمراجعة	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	BOX3		
B. If amending the registered agent and/or agent and/or the new registered office address.	registered office address on our	records, enter the name of the new regist	
Name of New Registered Agent:	NOFAR TAPIARO		
New Registered Office Address:	4110 NW 78 LANE		
	Enter Florida xweet address		
	CORAL SPRINGS	, Florida 33065	
	Ciw	Zip Code	

New Registered Agent's Signature, if changing Registered Agent:

SHICT ADDISON LLC

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 affice 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

2020 JUN 16 Aii 10: 02

Title	Name	Address	Type of Action
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		□Remove	
			[] Change

	2020 JUN 16 AH 10: 02
N/A	
ective date, if other than the date of filing:	(optional)
effective date is listed, the date must be specific and cannot e: If the date inserted in this block does not meet the	be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0 exapplicable statutory filing requirements, this date will not be fisted
ument's effective date on the Department of State's	records,
	19 At the section of the The Other day offer
cord specifies a delayed effective date, but not an effe s filed.	ective time, at 12:01 a.m. on the earlier of: (b) The 90th day after
6	
ed 6/16 2024	0.
11/11	
10	e or authorized representative of a member

Typed or printed name of signee