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SECRETARY OF STATE DIVISION OF CORPORATIONS

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COVER LETTER

TO:		ration Secti on of Corpo				
enn ie		IAMI CON	TAINER, LLC			
SUBJE	CI: _		Name of Limi	ited Liability Company		-
The encl	losed A	rticles of Ar	mendment and fee(s) are sub	mitted for filing.		
Please re	eturn al	correspond	ience concerning this matter	to the following:		
			Ricardo Bowen			
				Name of Person		_
			MIAMI CONTAINER. LL	.c		
				Firm/Company		_
			728 STANTON DR.			
				Address		_
			WESTON, FL 33326			
				City/State and Zip Code	-	_
			rbowen@miamicontainer.us			_
			E-mail address: (1	o be used for future annual re	port notification)	
For furth	ner info	rmation con	cerning this matter, please ca	all:		
Ricardo	Bowen			786 499-1	3122	
		Name of P	erson	Area Code	Daytime Telephone Numb	per
Enclosed	d is a ch	eck for the	following amount:			
\$25.	00 Filir	g Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclose	Certifi (sed) Certifi	Filing Fee, cate of Status & ed Copy nal copy is enclosed)

MAILING ADDRESS:

TO:

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

MIAMI CONTAINER, LLC		
(Name of the Limited Liabilit (A Florida	y Company as it now appears on our records.) Limited Liability Company)	
The Articles of Organization for this Limited Liability Co	ompany were filed on 03/11/2013	and assigned
Florida document number L13000036546	<u>_</u> .	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limi	ted liability company here:	
The new name must be distinguishable and contain the words "Limi	ited Liability Company," the designation "LLC" or t	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDR	ESS)	:
		SION SION
		<u> </u>
nter new mailing address, if applicable:		7 600 C
Mailing address MAY BE A POST OFFICE BOX)		A P P S S
		: A
		0
 If amending the registered agent and/or regist egistered agent and/or the new registered office addr 		ter the name of the n
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	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.

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	LANDIN BUSINESS, LLC	8200 NW, 41ST ST., Suite 315	■ Add
		Doral, FL 33166	☐ Remove
			☐ Change
			Add
			☐ Remove
			Change
			
			□ Remove
			Change
			
			Remove
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E. Effective	date, if other thar	the date of fi	iling:			(optional)		
(If an effecti	date, if other thar we date is listed, the dat he date inserted in the	e must be specific	c and cannot be p	rior to date of fili olicable statutor	ig or more than 90 v filing require	days after filing.) Pursuant to will not be	605.02 listed :
document	's effective date on t	he Department	of State's recor	rds.				
TC 4.)								
	d specifies a dela oth day after the			not an effec	tive time, at	12:01 a.m.	on the ea	arlier
Dated Ma	y 8		2018	A:				
				les Saule				
		Signature o	of a member or a	uthorized represe	ntative of a memi			
			<i>y</i>					

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Filing Fee: \$25.00