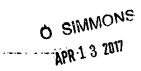
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(Requestor's Name)	
(Address)	500297363325
(Address)	,
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	04/12/1701017012 **25
(Business Entity Name)	
(Document Number)	
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**25.00

COVER LETTER

TO:	Registration Sec Division of Corp			
SUBJE		OWARE, LLC		
SUBJE	CI:	Name of Lin	ited Liability Company	
The enc	losed Articles of A	mendment and fee(s) are sub	mitted for filing.	
Please re	eturn all correspon	dence concerning this matter	to the following:	
		Mercedes M. Sellek, Esq		
			Name of Person	
		MSJ Corporate Services, I	LC	
			Firm/Company	
		2333 Ponce de Leon Blvd.	, Suite 314	
			Address	
		Coral Gables, FL 33134		
			City/State and Zip Code	
		msj@msjcorpserv.com		
		E-mail address: (to be used for future annual report notif	leation)
For furth	er information cor	ncerning this matter, please ca	all:	
Merced	es M. Sellek, Esq.		786 539-1425	
	Name of I	Person	at () Area Code Daytime	Telephone Number
Enclosed	l is a check for the	following amount:		
\$25 .	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

		City	Zip Code
		, Florida	
-		Enter Florida street address	l ggas (4)
New Registered Office Address:			(2)
Name of New Registered Agent:	N/A		The second of th
			., 19
registered agent and/or the new registered of	onice aggress he	<u>re</u> :	
B. If amending the registered agent and			r the name of the ne
(Mailing address MAY BE A POST OFFICE BOX)		Miami, FL 33177	
Enter new mailing address, if applicable:		13720 SW 152nd Street	
Timepai office uniness MOST BETTSTAD	<u> </u>		
(Principal office address MUST BE A STRE			
Enter new principal offices address, if appli	cable:	N/A	
The new name must be distinguishable and contain the	words "Limited Lial	bility Company," the designation "LLC" or the	abbreviation "L.L.C."
N/A			
A. If amending name, enter the new name	of the limited lia	bility company here:	
This amendment is submitted to amend the fol	llowing:		
Florida document number L13000072046	·		
The Articles of Organization for this Limited	Liability Compan	y were filed on US/10/2013	and assigned
(Name of the Lim	ited Liability Comp (A Florida Limited	pany as it now appears on our records.) I Liability Company)	
M&C HARDWARE, LLC			

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

Page 1/of 3

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 = M $AMBR = A$	lanager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			□ Remove
			Change
			Remove
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fect	date, if other than the date of filing: (optional) ve date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pu	
ote:	the date inserted in this block does not meet the applicable statutory filing requirements, this date will	not be listed as
cun	's effective date on the Department of State's records.	
re	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on	the earlier of
	Oth day after the record is filed.	
	16/10 2017	
ated	$\frac{4/10}{1}$, $\frac{20/7}{1}$	
	1 // I // Male	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00