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To:

Division of Corporations

Fax Number

: (850)617-6383

From: Carrie Ramos, FRP Paralegal PLEASE FAX CONFIRMATION TO 407 244-5690

Account Name : GRAYROBINSON, P.A. - ORLANDO

Account Number : I20010000078

Phone

: (407)843-8880

Fax Number

: (407)244-5690

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

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MI MALLZ GROUP LLC

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

		10
22	CLES OF AMENDMENT TO CLES OF ORGANIZATION OF	19 OCT 2 PAIL 30
MI MALLZ GROUP LLC		
(Name of the Limited	Liability Company as it now appears on our records. Florids Limited Liability Company)	
The Articles of Organization for this Limited Liab Florida document number L13000105660	nility Company were filed on July 25, 2013	and assigned
This amendment is submitted to amend the follow	ring:	
A. If amending name, enter the new name of the	he limited liability company here:	
	A STATE OF THE STA	the state of the s
The new name must be distinguishable and contain the work		of the sourceration E.L.C.
Enter new principal offices address, if applicable (Principal office address MUST BE A STREET)		
(Frincipal office film as in dot BE A O'ALEA		
Enter new matting address, if applicable:		
(Mailing address MAY BE A POST OFFICE Be	<u> </u>	
B. If amending the registered agent and/or registered agent and/or the new registered officered of the new registered of the new rea	registered office address on our records ce address bere;	, enter the name of the new
Name of New Registered Agenu		
New Registered Office Address:	Enter Florida street address	

	, Flo	rida

Now 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

or removed from our records:

MGR = 1 AMBR = 2	Manager Authorized Member		
<u>Title</u>	Name	<u>Address</u>	Type of Action
MGR	Jan C Quast	GROOT DAVELAAR 145-147	
		WILLEMSTAD, CURAÇÃO	
			□ Remove
			Change
MGR	Angelica M Cotes	10700 NW 66 st #509	C
		Doral, FL 33178	
			Remove
			☐ Change ——
			G Chaire
			D Add ;*
			P t (N) (N) □ Remove
			B ################################
			Change OC 7 2 P.Y. II. 30
			Add 3.
			Remove
			□ Change
			C Add
			□ Remove
			☐ Change
			□ Remove
			Change

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added

Page 2 of 3

If ame	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
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		:
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Note: decum	ve date, if other than the date of filing: (optional) active date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filling.) If the date inserted in this block does not meet the applicable statutory filling requirements, this date went's effective date on the Department of State's records. and specifies a delayed effective date, but not an effective time, at 12:01 a.m. of 90th day after the record is filed.	rill not be listed as the
	October 1 2019	
Dated .		
	Signature of a member or englishred representative of a member	
	For and on behalf of : Waterway Hills B.V.	
	By: United International Trust N.V., Managing Director	
	b). 044000 10001010010100101001010101010101	

Filing Fee: \$25.00