

L130000112861

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

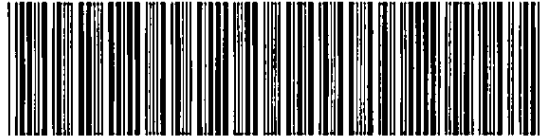
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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09/19/22--01023--015 **25.00

2022 SEP 19 PM 12:01
STATE

LAW OFFICES OF
JOSEPH B. RYAN III, P.A.
8925 S.W. 148th STREET, SUITE 200
MIAMI, FLORIDA 33176

PHONE: (305) 444-4949
E-MAIL: JOSEPH@JBRYANLAWFIRM.COM

FAX: (305) 964-5723
WWW.RYANLAWFIRM.MIAMI

September 12, 2022

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: MIACHINA LLC

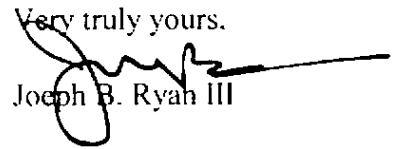
Dear Sir/Madam:

I attach the following in connection with the above referenced company:

1. Form Cover Letter and Articles of Amendment; and
2. My check in the amount of \$25.00 made payable to the Florida Department of State

Please do not hesitate to contact me should you have any questions.

Very truly yours,


Joseph B. Ryan III

enclosures as stated

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: MIACHINA 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:

JOSEPH B. RYAN III

Name of Person

JOSEPH B. RYAN III, P.A.

Firm/Company

8925 S.W. 148TH STREET, SUITE 200

Address

PALMETTO BAY, FLORIDA 33176

City/State and Zip Code

JOSEPH@JBRYANLAWFIRM.COM

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

For further information concerning this matter, please call:

JOSEPH B. RYAN III

305 444-4949
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed 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 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**

MIACHINA LLC

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

The Articles of Organization for this Limited Liability Company were filed on 08/09/2013 and assigned
Florida document number L13000112861.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

HISCOSA LLC

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:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

New Registered Office Address:

Enter Florida street address

Florida

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

MGR = Manager
AMBR = Authorized Member

AMBR = Authorized Member

[illegible]

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

[illegible]

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated September 7 2022

Wesley Dubois
Signature

Signature of a member or authorized representative of a member

Motsa Dubois

Typed or printed name of signee