## 213000/55598

| (Re                     | equestor's Name)   | -               |
|-------------------------|--------------------|-----------------|
| (Ad                     | ldress)            |                 |
| (Ac                     | ldress)            |                 |
| (Cir                    | ty/State/Zip/Phone | <del>:</del> #) |
| PICK-UP                 | ☐ WAIT             | MAIL            |
| (Bu                     | siness Entity Nan  | ne)             |
|                         |                    |                 |
| (Do                     | cument Number)     |                 |
| Certified Copies        | Certificates       | of Status       |
| Special Instructions to | Filing Officer:    |                 |
| special instructions to | DEC -<br>A. L      |                 |
|                         |                    |                 |

Office Use Only



600254225556

12/04/13--01009--011 \*\*60.00

2813 C820 -4 FN 4: 17

## **COVER LETTER**

| TO: Registration Sec<br>Division of Corp | tion<br>orations                            | . , .  |   |             |  |
|--|---|--|---|-------------|--|
| SUBJECT: Merliv                          | Production ( Name of Limite                 | Solutions, Wed Liability Company                                   |   |             |  |
|  |   |  |   |             |  |
| The enclosed Articles of A               | amendment and fee(s) are subm               | nitted for filing.   |   |             |  |
| Please return all correspon              | dence concerning this matter t              | o the following:   |   |             |  |
|  | Kristin                                     | Rosendale<br>Name of Person  |   |             |  |
| ·  | Medin Produc                                | tion Solutions Pirm/Company  |   |             |  |
|  | 401 SW 2nd                                  | Place  | 2   | 2811        | •^   |
|  | Dania Beac                                  | Address  FU 33004  City/State and Zip Code                         | ## DE COMMENT OF THE |             | The state of the s |
|  | Kristinroge<br>E-mail address: (to          | endale ame.c   | tion)   | . <u>;.</u> | "No ce"  |
| For further information co               | ncerning this matter, please ca             | dl:  | <b>-</b> ′  |             |  |
| Kristin Ros                              | ierdall<br>Person                           | at (786) 459 8.<br>Area Code & Daytime T                           | 2.00<br>Telephone Number  | <b>-</b> -  |  |
| Enclosed is a check for th               | e following amount:                         |  |   |             |  |
| □ \$25.00 Filing Fee                     | □\$30.00 Filing Fee & Certificate of Status | □\$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | Certificate of S<br>Certificate Copy<br>(additional cop   | status &    | losed)   |

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

ompany as it now appears on our records.) The Articles of Organization for this Limited Liability Company were filed on 11/5/13 Florida document number 43000155598 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" "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 City

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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

| MGR = Mana<br>MGRM = Ma | nger<br>Inaging Member   | •        |   |  |                |
|-------------------------|--|----------|---|--|----------------|
| <u>Title</u>            | <u>Name</u>  | 4        | Address                                   | -  | Type of Action |
|                         |  | <u>-</u> |   |  | Add            |
|                         |  |          |   |  | Remove         |
|                         |  | -        |   | 74 g   | Remove         |
|                         |  | •        |   |  |                |
|                         |  | -        |   | (4) The  | _ Add \        |
|                         |  | -        |   | (1) (1) (3) (3) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4 | Remove         |
|                         |  |          |   |  |                |
|                         |  |          |   |  | Add            |
|                         |  | •        |   |  |                |
|                         |  |          |   | -  | _ Remove       |
|                         |  |          |   |  | -              |
|                         |  |          | ·   |  | Add            |
|                         |  |          |   |  | Remove         |
|                         |  |          |   |  | -              |
|                         |  |          |   |  | Add            |
| <del></del>             |  |          | · · · · · · · · · · · · · · · · · · ·     |  |                |
|                         |  |          | P. C. |  | Remove         |
|                         |  |          | <del>_</del>                              |  | _              |
|                         | Mary and the second |          |   | · · · · · · · · · · · · · · · · · · ·                      | Add            |
|                         |  |          |   |  | Remove         |
|                         |  | ٠        |   |  |                |

|       | g (3 p   |
|-------|--|
| •     |  |
|       |  |
|       |  |
|       |  |
|       |  |
|       |  |
|       |  |
| 11/14 | 2012   |
| 111.  |  |
|       | $k \wedge c \wedge d \circ (k)$                                |
|       | 14106111111  |
|       | Signature of a member or authorized representative of a member |
|       | Kristinkosendal  |
|       | Typed or printed name of signee                                |

Filing Fee: \$25.00