Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000275364 3)))



H230002753643ABC%

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet. AND THE RESIDENCE OF THE PROPERTY OF THE PROPE

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : FASTKIT CORP Account Number : I2010000009 Phone : (305)599-0839 Fax Number : (305)592-9591

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

Email Address:___



LLC AMND/RESTATE/CORRECT OR M/MG RESIGN . MVP TRADER COMPANIES LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

Electronic Filing Menu Corporate Filing Menu

HEESTS 01 3UA

T. LETHEUX

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MVP TRADER COMPANIES LLC				
(Name of the Limited Liability Company of A Florida Limited Liab	is it now annears on our records.) lity Company)			
The Articles of Organization for this Limited Liability Company we	re filed on 04/06/2015		and assigne	ed
Florida document number L15000059815				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liability	y company here:			
The new name must be distinguishable and contain the words "Limited Liability	Company." the designation "LLC" or	the abbrev	intion "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)				
		(L)	25	
B. If amending the registered agent and/or registered office add	iress on our records, enter the	name o	the new re	<u>ecist</u>
agent and/or the new registered office address here:			<i>:</i>	
			1	
Name of New Registered Agent:		<u> </u>	<u>ළා</u>	· ·
New Registered Office Address:				
ACH ROSSICIES OTHER MONEY	Enter Florida street address	ر	<u>ب</u> ج	
	. Flori	da	ហ ហ	
	C/ty		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>	Name	Address	Type of Action
MGR	PAULINA SEPULVEDA	250 CONGRESS PARK DR	□Add
		APT 434 DLERAY BEACH FL 33445	■Remove
MGR	VALERY SEPULVEDA	732 N Orlando Ave #103	= Add
		West Hellywood, CA 90069	□Remove
			☐ Change
MGR	MAURICIO SEPUEVEDA	250 CONGRESS PARK DR	
	_	APT 434 DELRAY BEACH FL 33445	□Remove
			Change
			□Add
			□Remove
			□Сһъпде
		□Remove	
			□Change
			DAdd
			□Remove
			□Change

		Mark street, and the street st
-		
	and the second s	
2		
 Note: If the date inserted in t 	n the date of filing: the most be specific and cannot be prior to date of this block does not meet the applicable sto the Department of State's records.	(optional) at filing or more than 90 days after filing.) Pursuant to 605,0207 (datory filing requirements, this date will not be listed as the
he record specifies a delayed e ard is filed.	Pretive date, but not an effective time, at	12:01 a.m. on the earlier of: (b) The 90th day after the
Os/08 Dated	2023	
(Valing Sipulueda	Signature of a member or nuthenzed r	

Filing Fee: \$25.00