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To:

Division of Corporations

Fax Number : (850)617-6383

From:

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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 MCC DORAL PROPERTY LLC

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ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

	MCC DORAL PROPERTY LLC		
(Name of the Limi	Ited Liability Company as It now appear (A Florida Limited Liability Company)	s on our records.)	•
The Articles of Organization for this Limited L	Liability Company were filed on	07/09/2015	and assigned
Florida document numberL1500011798			
This amendment is submitted to amend the foll	lowing:		
A. If amending name, enter the new name o	of the limited liability company he	<u>re</u> :	
Mavim Property Trust, LLC			
The new name must be distinguishable and contain the w	words "Limited Liability Company," the de	signation "LLC" or the abl	creviation "L.L.C."
Enter new principal offices address, if applic	cable:		
Principal office address MUST BE A STREE			
Enter new mailing address, if applicable:	BOX)		
 If amending the registered agent and/or re 	egistered office address on our re	cords, enter the name	of the new regis
 If amending the registered agent and/or regent and/or the new registered office addres 	registered office address on our re ss here:	cords, enter the name	of the new regis
. If amending the registered agent and/or r	registered office address on our re ss here:	cords, enter the name	of the new regi
3. If amending the registered agent and/or regent and/or the new registered office addres	<u></u>		of the new regi
3. If amending the registered agent and/or regent and/or the new registered office address Name of New Registered Agent:	<u></u>	cords, enter the name	of the new regi
	<u></u>		

N

I 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	MANUEL G. MENDEZ	10263 NW 52 TERRACE	□A d d
		DORAL, FL 33178	
			=Change
MGR	MARGARET S MENDEZ	10263 NW 52 TERRACE	
		DORAL, FL 33178	≅Remove
•	,		Change
AGR	MANUEL E. MENDEZ	10263 NW 52 TERRACE	= Add
		DORAL, FL 33178	□ Remove
			□ Change
MGR VIVIAN MENDEZ	VIVIAN MENDEZ	10263 NW 52 TERRACE	≅Add
		DORAL, FL 33178	П Петюче
			Change
fGR	ALEXANDRA MENDEZ	10263 NW 52 TERRACE	bbA 6
		DORAL, FL 33178	
			□ Change
MGR	MARCELA MENDEZ	10263 NW 52 TERRACE	BAdd
		DORAL, FL 33178	□ Remove

							
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Effective (date, if other tha	in the date of fili	ino.		(opti	onel)	
If an effectiv	c date is listed, the da	ste must be specific a	and cannot be prior	to date of filing or n	nore than 90 days after	filing) Pursuant to 605	5.0207
document,	s effective date on	the Department of	f State's records.	acie sizmiory nur	ig requirements, thi	s date will not be list	ed as
e record sp rd is filed.	ecifies a delayed ef	Tective date, but no	ot an effective ti	me, at 12:01 a.m.	on the earlier of: (b	The 90th day after	r the
Dated	April	22	202	, 			
	1	,		~ /			

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Typed or printed name of signee