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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Muramar Bardens 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:
Salvatore Asera
Miramas Gardens LLC Firm/Company
2900 Hempstead Toke Rin 112
Leintown my 11766 Zen 3 T
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Salvatore Avena at 5/6, 135 - 0754 3
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Solution Status Status Solution Status Status Solution Status Solution Status Solution Status Solution Status Solution Status Solution Status Status Solution Status Solution Status Solution Status Solution Status Solution Status Solution Status Status Solution Status

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

	Or						
	ar Gardens	· ·					
(Name of the Limited) (A	Liability Company as it now appear Florida Limited Liability Company)	s on our records.)					
The Articles of Organization for this Limited Liab	ility Company were filed on	a:a:	nd assigned				
Florida document number <u>L 1500 / C</u>	104669	•					
This amendment is submitted to amend the following	ing:						
A. If amending name, enter the new name of th	e limited liability company he	ere:					
The new name must be distinguishable and contain the word	ls "Limited Liability Company," the d	esignation "LLC" or the abbreviat	ion "L.L.C."				
Enter new principal offices address, if applicable	le:						
(Principal office address MUST BE A STREET A	<u>4DDRESS)</u>						
			<u></u>				
Enter new mailing address, if applicable:							
(Mailing address MAY BE A POST OFFICE BO	<u></u>	·	· · · · · · · · · · · · · · · · · · ·				
		TASS TASS	<u>ਨ</u>				
		CRE	香 刊				
B. If amending the registered agent and/or	0	our records, enter the r	name of the new				
registered agent and/or the new registered offic	e address here:	85 C					
			₹ □				
Name of New Registered Agent:			ယ				
New Registered Office Address:		5 F	28				
 -	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

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 **Type of Action** Title Name □ Change □ Add ☐ Remove ☐ Change ☐ Remove □ Change □ Add ☐ Change □ Add ☐ Remove

☐ Change

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Filing Fee: \$25.00