# L16000093391

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2016 OCT 27 PH TO 14
SECRETARY OF STATE
SECRETARY OF STATE

K. SALY OCT 28 2016

### **COVER LETTER**

SUBJECT:	MJ GLOBA	AL HOLDINGS LLC.					
SUBJECT:	Name of Limited Liability Company						
The enclosed	l Articles of	Amendment and fee(s) are sub	mitted for filing.				
			-				
		JAHED MOVLA					
			Name of Person	<del></del>			
		MJ GLOBAL HOLDINGS	S LLC:				
			Firm/Company				
		4885 NW 115 WAY					
		SUNRISE, FLORIDA 333	23				
	Name of Person  MJ GLOBAL HOLDINGS LLC:  Firm/Company  4885 NW 115 WAY  Address  SUNRISE, FLORIDA 33323  City/State and Zip Code  J.MOVLA55@GMAIL.COM  E-mail address: (to be used for future annual report notification)  rther information concerning this matter, please call:	<del> </del>					
		J.MOVLA55@GMAIL.CO	M				
		E-mail address: (	to be used for future annual report not	fication)			
or further in	nformation c	oncerning this matter, please ca	alt:				
JAHED MO	VLA						
	Name o	f Person		ne Telephone Number			
		,					
Enclosed is a	check for th	e following amount:					
■ \$25.00 F	iling 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:

TO:

Registration Section
Division of Corporations

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

2016 OCT 27 PM 4. 14
SECRETARY OF STATE

MI GLOBAL HOLDINGS 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 05/12/2016 and assigned

Florida document number L16000093391

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 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:

#### New Registered Agent's Signature, if changing Registered Agent:

Name of New Registered Agent:

New Registered Office Address:

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.

Citv

JAHED MOVLA

SUNRISE

4885 NW 115 WAY

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

, Florida 33323
Zip Code

Page 1 of 3

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>	<u>Name</u>	Address	Type of Action
MGRP	MICHELLE MATOS	4885 NW 115 WAY	
		SUNRISE, FLORIDA 33323	■ Remove
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_	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
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ffective	ve date, if other than the date of filing:(optional)	
an effect	ctive 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 605.0 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed	
	ent's effective date on the Department of State's records.	
	and appairing a delegand effective data. But not an effective time, at 12,01 and an abba soulis	<u></u> .
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlie 90th day after the record is filed.	r or:
ated	october 19. , 2016.	
	Signature of a member or authorized representative of a member	
	Typed or printed name of signee	

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Filing Fee: \$25.00