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Special Instructions to	Filing Officer:			
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October 8, 2020

YAMILET DAZA 1066 NW 123RD CT MIAMI, FL 33182

SUBJECT: MP STORE #4 Ref. Number: L16000099398

We have received your document for MP STORE #4 and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Octavia L Simmons Regulatory Specialist II Supervisor

Letter Number: 420A00019720

## **COVER LETTER**

		istration Sec ision of Corp					
SUBJEC	σт.	MP STORE #4 LLC					
JUBJEC	U 1 .	Name of Limited Liability Company					
The encl	losed	Articles of A	Amendment and fee(s) are sub-	mitted for filing.			
Please re	eturn	all correspon	ndence concerning this matter	to the following:			
			YAMILET FAZIO DAZA				
		Name of Limited Liability Company  ed Articles of Amendment and fee(s) are submitted for filing.  In all correspondence concerning this matter to the following:  YAMILET FAZIO DAZA  Name of Person  MP STORE #4 LLC  Firm/Company  1066 NW 123rd CT  Address  MIAMI, FL 33182  City/State and Zip Code  yamilet.fazio@hotmail.com  E-mail address: (to be used for future annual report notification)  information concerning this matter, please call:  If FAZIO DAZA  Name of Person  Area Code  Daytime Telephone Number  s a check for the following amount:  Piling Fee  \$555.00 Filing Fee					
			MP STORE #4 LLC				
				Firm/Company			
			1066 NW 123rd CT				
				Address			
			MIAMI, FL 33182				
				City/State and Zip Code	<del></del>		
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For furth	ner ir	iformation co			ionion)		
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Name of Person			: Telephone Number				
Enclosed	disa	check for th	e following amount:				
□ <b>\$</b> 25.	.00 F	iling Fee	☐ \$30.00 Filing Fee & Certificate of Status	■ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Sectificate of Status & Certificate Copy (additional copy is enclosed)		
	Reg Div P.C	ling Address gistration S vision of Co D. Box 632' lahassee, F	Section orporations 7	Street Address: Registration Sec Division of Corp The Centre of T 2415 N. Monroe Tallahassee, FL	porations allahassee e Street, Suite 810		

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATIO: . OF

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MP STORE #4 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 Liz Florida document number L16000099398	ability Company	were filed on 05-20-2016	and assigned			
This amendment is submitted to amend the follo	wing:					
A. If amending name, enter the new name of	the limited liab	ility company here:				
The new name must be distinguishable and contain the wo	ords "Limited Liabil	lity Company," the designation "LLC" or	the abbreviation "L.L.C."			
Enter new principal offices address, if applica	ible:					
(Principal office address MUST BE A STREE)	T ADDRESS)					
Enter new mailing address, if applicable:		1066 NW 123rd CT				
(Mailing address MAY BE A POST OFFICE BOX)		MIAMI, FL 33182				
B. If amending the registered agent and/or reagent and/or the new registered office address		address on our records, <u>enter the</u>	e name of the new registered			
Name of New Registered Agent:	YAMILET FAZIO DAZA					
New Registered Office Address:						
		Enter Florida street address				
		, Floric				
N		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

11.1300 200 BAINS 30 Title <u>Name</u> <u>Address</u> Type of Action MGR YAMILET FAZIO DAZA 1066 NW 123rd CT MIAMI, FL 33182 \_\_ Change **AMBR EFRAIN TORRES ARIAS** 1066 NW 123rd CT MIAMI, FL 33182 AMBR EDWIN J. ARIAS GAMBOA 12508 W SUNRISE BLVD SUNRISE, FL 33323 \_\_\_\_ 

Change **AMBR EDGAR A ARIAS GAMBOA CALLE 3A AV TAJAMARES** \_\_\_\_ 🗀 Add VILLA CAMPESTRE 25 #74 \_\_\_ 🗏 Remove PTO COLOMBIA, COLOMBIA \_\_\_\_ 

Change \_\_\_\_\_ 🗆 Add 

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reffective date is listed, the date must	be specific and cannot be pri	or to date of filing or	more tha	n 90 da	ys after filing.) Pursuant t	o 605.0
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	Signature of a member or au	TULO.	ve of a m	ember		_

Filing Fee: \$25.00