

LN000138208

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

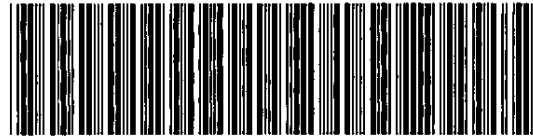
(Business Entity Name)

(Document Number)

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16 SEP 12 AM 11:53
CLERK OF DISTRICT COURT
ALACHUA COUNTY, FLORIDA

SEP 15 2016

Y SULKER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Thompson Intenational Holding 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:

Monica Cruz

Name of Person

Firm/Company

714 Sw 81st Ave Apt 8A

Address

North Lauderdale FL 33068

City/State and Zip Code

Imonicacruz92@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Monica Cruz 954 692-4585
Name of Person at () Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|---|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee & Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | <input checked="" type="checkbox"/> \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
|---|--|--|---|

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
OF**

Thompson International Holding 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 7/22/2016 and assigned
Florida document number L16000138208.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

MMC GLOBAL INVESTMENTS LLC

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)

714 SW 81st Ave Apt 8A

North Lauderdale FL 33068

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

714 SW 81st Ave Apt 8A

North Lauderdale FL 33068

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:

Name of New Registered Agent:

Vernon Marquis

New Registered Office Address:

6860 Nw 69th Ct

Enter Florida street address

Tamarac

City

, Florida 33321

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> | <u>Name</u> | <u>Address</u> | <u>Type of Action</u> |
|--------------|-----------------|---------------------------|--|
| P | Thompson, Treon | 6860 Nw 69th Ct | <input type="checkbox"/> Add |
| | | Tamarac, FL 33321 | <input checked="" type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| P | Cruz, Monica | 714 Sw 81st Ave Apt 8A | <input checked="" type="checkbox"/> Add |
| | | North Lauderdale FL 33068 | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
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6 SEP 12 4:11:50 PM
LAWRENCE, LORIAN

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

16 SEP 12 AM 11:55
ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED

E. Effective date, if other than the date of filing: 9/12/2016 (optional)

(If an effective 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 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated 9-8-2016,

Signature of a member or authorized representative

Signature of a member or authorized representative of a member

Tread Thompson

Typed or printed name of signee