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COVER LETTER

	Registration S Digision of Co		-13	
SUBJEC	MGL-US	A Importacion, Exportacion Y C	omercio LLC	
SUBJEC	-1:	Name of Lim	ited Liability Company	
The encle	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	turn all corresp	ondence concerning this matter	to the following:	
		Pedro A Da Silva Filho		
			Name of Person	
		MGL-USA Importacion, E	exportacion Y Comercio LLC	
			Firm/Company	
		8610 NW 66 Street		
			Address	
		Miami, FL 33166		
			City/State and Zip Code	
		pa@mecanografica.com.br		
		E-mail address: (to be used for future annual report notific	cation)
For furth	er information of	concerning this matter, please co	all:	
D. Rube	n Fajardo Jr.		305 260-4600 Ext.	
	Name (of Person	Area Code Daytime	Telephone Number
Enclosed	l is a check for t	he following amount:		
\$25. 0	00 Filing 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:

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

MGL-USA Importacion, Exportacion, Y Comercio LLC

(<u>Name of the Limited Liability</u> (A Florida I	Company as it now appears on our records.) Limited Liability Company)
The Articles of Organization for this Limited Liability Co	ompany were filed on $\frac{08/03/2016}{}$ and assigned
Florida document number L16000145458	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limit	ed liability company here:
MGL-USA International LLC	
The new name must be distinguishable and contain the words "Limite	ed 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 ADDRE	ESS)
	25 - 1
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered agent and/or the new registered office address Name of New Registered Agent:	ered office address on our records, <u>enter the name of the new</u> ess here:
New Registered Office Address:	
	Enter Florida street address
	, Florida
	City Zip Code
New Registered Agent's Signature, if changing Registered	Agent:
provisions of all statutes relative to the proper and con accept the obligations of my position as registered age	nd agree to act in this capacity. I further agree to comply with the mplete performance of my duties, and I am familiar with and ent as provided for in Chapter 605, F.S. Or, if this document is doffice address, I hereby confirm that the limited liability
	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 = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			☐ Remove
			Change
			□ Add
			🗀 Remove
			Change
			□ Add
			Remove
			Change
			Add
			☐ Remove
			Change
			□ Remove
			Change
		-	☐ Remove
			Channe

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Filing Fee: \$25.00