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COVER LETTER

TO:

	tegistration Sec Division of Corp			
end ieza		LUTION DESIGN, LLC		
SUBJECT	ı;	Name of Lim	ited Liability Company	
The enclos	sed Articles of a	at () Area Code Daytime Telephone Number be following amount: \$\Begin{array}{cccccccccccccccccccccccccccccccccccc		
Please retu	ırn all correspo	ndence concerning this matter	to the following:	
		GIAN CARLO VISCIGI	A	
			Name of Person	
		MIAMI SOLUTION DES	IGN, LLC	
			Firm/Company	
		7345 NW 79th TERRACE	:	
			Address	
		MEDLEY, FL 33166		
			·	
		•		
For further	r information co		•	ification)
GIAN CA	.RLO VISCIGI	JA	305 222-7482	
	Name of			ne Telephone Number
Enclosed is	s a check for th	e following amount:		
\$25.00	Filing Fee			
	Registra Division P.O. Bo	NG ADDRESS: ation Section of Corporations ox 6327 ssee, FL 32314	STREET/COURI Registration Section Division of Corpo Clifton Building 2661 Executive Co Tallahassee, FL 33	on rations enter Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MIAMI SOLUTION DESIGN , LLC				
(Name of the Limited I	Liability Comp Florida Limited	any as it now appears of Liability Company)	n our records.)	
The Articles of Organization for this Limited Liabi Florida document number 1.16000146594	lity Company	were filed on NOV	/EMBER 13TH, 2019	and assigned
This amendment is submitted to amend the followi	ng:			
A. If amending name, enter the new name of th	e limited liat	oility company here:	:	
N/A				
The new name must be distinguishable and contain the words	s "Limited Liab	ility Company," the desig	nation "LLC" or the abbr	eviation "L.L.C."
Enter new principal offices address, if applicable:		N/A		
(Principal office address MUST BE A STREET A	(DDRESS)		32	2018 SE
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u> X]</u>	N/A		HOV 25 PH 12: 20
B. If amending the registered agent and/or registered agent and/or the new registered office			ur records, <u>enter tl</u>	ne name of the ne
Name of New Registered Agent:	N/A			
New Registered Office Address:	N/A			
 -		Emer 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	PEREZ, EDIHT	7345 NW 79th Terrace	
		Medley, FL 33166	
			■ Remove
			Change
AMBR	FLORES GUZMAN, HERMES	7345 NW 79th Terrace	
		Medley, FL 33166	■ Remove
			Change
			□ Remove
			Change
			Add
			Remove
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		-	□ Remove
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