Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number

Email Address:___

: (850)617-6383

From:

Account Name : GLOBAL ACCOUNTING AND TAX PROFESSIONAL CORP

Account Number : I20140000098 Phone : (786)372-1391

Fax Number : (786)762-2589

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

2021 OCT TZ FT 3: 32 SECRETARY OF STATE ALLAHASSEF, FLORIDA

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MIAMI BOOM REVOLUTION & REALTOR LLC

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OCT 13 2021

S. PRATHER

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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		938 15 L
MIAMI BOOM REVOLUTIO	N & REALTOR LLC	
(Name of the Limited Liability Compa- (A Florida Limited L	ny as it now appears on our records.) lability Company)	3: 5; TATE .ORID
The Articles of Organization for this Limited Liability Company	00/12/2016	and assigned
Florida document numberL16000154124		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
NI / A		hbreviation "C I C"
The new name must be distinguishable and contain the words "Limited Liabi		DDIEVIEGOR B.D.O.
Enter new principal offices address, if applicable:	7500 NW 25TH STREET	
(Principal office address MUST BE A STREET ADDRESS)	SUITE # 246	
(Principal office duaress MOST BE A STRONG, DOCUMENT	MIAMI FL 33122	
Enter new mailing address, if applicable:	7500 NW 25TH STREET	
	SUITE # 246	
(Maning gaaress MAT BE A 1 031 01 11 EL 2015)	MIAMI FL 33122	
		0.0
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the na	me of the new registered
Name of New Registered Agent: SURELY	MOLINA	
7500 NW	25TH STREET SUITE#246	
(Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered of agent and/or the new registered office address here: Name of New Registered Agent: SURE	E Classida acase address	_

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.

City

MIAMI

Enter Florida street address

Florida _

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of Cach prison in Sign added or removed from our records:

H210003800043

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
AMBR = Authorize			□Add
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record is filed.			21 (
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