## 116000217761

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## **COVER LETTER**

TO:

TO: Registration Division of C				
Pikilino I	.I.C			
SUBJECT:	Name of Lim	nited Liability Company		
The conditional Amilator	£ 4 1 € ( )	onter t con Etta a		
	of Amendment and fee(s) are sub	<b>Q</b>		
Please return all corres	pondence concerning this matter	to the following:		
	Daniel Vielleville, Esq.			
		Name of Person		
	Assouline & Berlowe, P.A			
		Firm/Company	: ;; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;	2022
	100 S.E. 2nd St., Suite 310	05	KET#	F   L
		Address	2000年	= -
	Miami, FL 33131		O E E E E E E E E E E E E E E E E E E E	E D
	dev@assoulineberlowe.con	City/State and Zip Code	FL	ED 9H 3: 07
	E-mail address: (	to be used for future annual report not	ification)	
For further information	concerning this matter, please c	all:		
Daniel Vielleville		567 5576 at ()		
Name	e of Person		ne Telephone Number	
Enclosed is a check for	the following amount:			
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Certificate of Certified Co (additional cop	of Status & opy
Mailing Addi Registration Division of P.O. Box 6. Tallahassee	n Section Corporations 327	Street Address: Registration Se Division of Co The Centre of T 2415 N. Monro Tallahassee, FL	rporations Fallahassee be Street, Suite 810	

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Pikilino LLC			
( <u>Name of the Limited Liab</u> (A Flor	bility Compar rida Limited L	ny as it now appears on our records.) hability Company)	
The Articles of Organization for this Limited Liability Florida document number L16000217761			and assigned
This amendment is submitted to amend the following:	:		
A. If amending name, enter the new name of the li	imited liabi	lity company here:	
MEC WATCHES LLC			
The new name must be distinguishable and contain the words "I	imited Liabil	ity Company," the designation "LLC" or t	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		575 NE 5 TER	ZZ HAR
(Principal office address MUST BE A STREET ADDRESS)		APT 653	<del>50</del> <del>7</del> <del>7</del>
The same of the sa	<u> </u>	FT LAUDERDALE, FL 33301	355 TO TO
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registe agent and/or the new registered office address here	red office a	ddress on our records, enter the	name of the new registered
	iel Viellevil	le	
New Registered Office Address: 100	S.E. 2nd St.	, Suite 3105	
New Registered Office Address.		Enter Florida street address	
Mia	ımi	Florid	a 33131
_		City	Zip Code
New Registered Agent's Signature, if changing Registe	ered Agent:		
I hereby accept the appointment as registered agent provisions of all statutes relative to the proper and accept the obligations of my position as registered being filed to merely reflect a change in the registe company has been notified in writing of this chang	l complete l agent as p ered office ge.	performance of my duties, and 1 provided for in Chapter 605, F.S.	am familiar with and Or, if this document is ne limited liability

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	Carlos S. Ramirez	86 Lakeside Villas, F2	
		Vega Alta, PR 00692	□Remove
			□Change
MGR	Erick K.T. Law	575 NE 5 TER	<b>=</b> Add
		АРТ 653	□Remove
		FT LAUDERDALE, FL 33301	2022 HAR IF I
			R FD AND PI
			M S 3 Remove
			rri ¬ □Change
			□Add
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cord specifies a delayed effective date, but not an effe s filed.	ective time	, at 12:01 a.	m, on the ea	rlier of: (	b) The	90th c	lay after th
s med.							
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Signature of a member	or authoriz	ed represents	tive of a mon	her			