117000027745

(Re	questor's Name)	
	-	
(Ad	ldress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	. #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
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COVER LETTER

TO:	Registration Se Division of Cor			
CHDI	MYA1502 ECT:			
SUBJ	ECI;		ited Liability Company	
The er	nclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please	return all correspo	ondence concerning this matter	to the following:	
		Alfonso Rodriguez		
			Name of Person	
		MYA 1502, LLC		
			Firm/Company	
		14298 SW 41 Street		
			Address	
		Miramar / Florida 33027		
			City/State and Zip Code	
		10AMGC@gmail.com	to be used for future annual report notif	(*************************************
For fur	rther information c	oncerning this matter, please co	·	ncation)
Alfons	so Rodriguez		786 326-6090	
<u></u>	Name o	f Person	at () Area Code Daytime	e Telephone Number
Enclos	sed is a check for th	ne following amount:		
\$ 2	5.00 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

MYA1502, LLC		
(Name of the Limited Liability Compar (A Florida Limited L	ny as it now appears on our record iability Company)	<u>s.</u>)
ne Articles of Organization for this Limited Liability Company orida document number L17000027745	were filed on February 3, 2017	and assigned
nis amendment is submitted to amend the following:		
If amending name, enter the new name of the limited liabil	lity company here:	
e new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "LLC	" or the abbreviation "L.L.C."
iter new principal offices address, if applicable:		
rincipal office address MUST BE A STREET ADDRESS)		
	-	35 70 may
nter new mailing address, if applicable:		ASS to the total
failing address MAY BE A POST OFFICE BOX)		- 5 × 5
If amending the registered agent and/or registered off gistered agent and/or the new registered office address here		s, enter the name of the
Name of New Registered Agent:		
New Registered Office Address:		<u>.</u>
<u></u>	Enter Florida street addres	rs
	, Flo	orida
	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>	Name	Address	Type of Action
AMBR	Martha Rosa Perez	14298 SW 41 Street, Miami, FL 33	Add
			Remove
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ective date, if other than the date of filing: 1 effective date is listed, the date must be specific and cannot be prior to date of filing o	or more than 90 days after filing.) Pursu	iant to 605.02
te: If the date inserted in this block does not meet the applicable statutory ficument's effective date on the Department of State's records.	iling requirements, this date will no	ot be listed:
record specifies a delayed effective date, but not an effective	e time, at 12:01 a.m. on th	ne earlier
The 90th day after the record is filed.	•	
// / 00 00.7		
ted <u>Manch</u> 29, 2017.		

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Filing Fee: \$25.00