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(Re	questor's Name)	
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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: MIOMI GING AND SOICE, U.C.
Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Proclid Gonzaloz
FIERCE CONSULTING
7735 NW WHH St BON7
Miami, FL 33/6/0
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Proceeding Grand And Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \$30.00 Filing Fee & \$\Bigcup \$55.00 Filing Fee & \$\Bigcup \$60.00 Filing Fee, \$\Bigcup \$\Bigcu

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

	AO SAICS UC.	
The Articles of Organization for this Limited Liability Companies Florida document number 121+00047 5.4.	ry were filed on	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
The new name must be distinguishable and contain the words "Limited Lial Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	bility Company." the designation "LLC" or the MIOMITE 3310	ne abbreviation "L.L.C."
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	COG NW 118th S MIGMI ₁ FL 331	Ot
B. If amending the registered agent and/or registered registered agent and/or the new registered office address he	office address on our records, <u>en</u> e <u>re</u> :	ter the name of the new
Name of New Registered Agent:		7.000 #: A
New Registered Office Address:	Enter Florida street address	25° G1
	. Florida	•
	City , Florida	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 = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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Affective date, if other than the date of filing: Yellow and cannot be prior to the date inserted in this block does not meet the application of the date on the Department of State's records.	of to date of filing of icable statutory fire.	more than 90 days ling requirements	optional) after filing.) Pu , this date will	rsuant to not be	605.0207 listed as
the record specifies a delayed effective date, but no	ot an effective	e time, at 12:0	01 a.m. on	the ea	arlier of
The 90th day after the record is filed.					
Dated 4 24 2017	A Like	al			
81g faiture of a member or aut	horized representati	ive of a member			-

Page 3 of 3

Filing Fee: \$25.00