

L17000052809

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

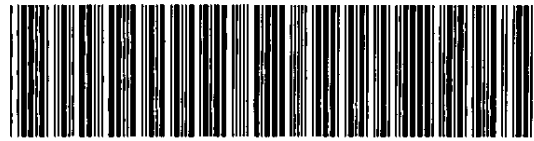
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

S. WARREN  
JUN 01 2017

# COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** M&M CONTRACTORS FLORIDA LLC  
\_\_\_\_\_  
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:

HOLLMAN MATOS  
\_\_\_\_\_  
Name of Person

M&M CONTRACTORS FLORIDA LLC  
\_\_\_\_\_  
Firm/Company

1227 S. DIXIE HWY W. 205  
\_\_\_\_\_  
Address

POMPANO BEACH FLORIDA 33060  
\_\_\_\_\_  
City/State and Zip Code

contractors@mercadeog.com  
\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

HOLLMAN MATOS  
\_\_\_\_\_  
Name of Person

954 4783046  
at (\_\_\_\_\_) \_\_\_\_\_  
Area Code Daytime 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 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**

M&M CONTRACTORS FLORIDA LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on MARCH 7, 2017 and assigned Florida document number L17000052809.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

M&M SOLUTIONS FLORIDA LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**Enter new principal offices address, if applicable:**

1227 S. DIXIE HWY W. 205

**(Principal office address MUST BE A STREET ADDRESS)**

POMPANO BEACH FLORIDA 33060

**Enter new mailing address, if applicable:**

11359 NW 83 WAY DORAL FL 33178

**(Mailing address MAY BE A POST OFFICE BOX)**

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

RIGOBERTO MORENO

New Registered Office Address:

1227 S. DIXIE HWY W. 205

*Enter Florida street address*

POMPANO BEACH

Florida 33060

*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

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TALLAHASSEE FLORIDA

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>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
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 TALLAHASSEE, FLORIDA

**D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)**

WE JUST NEED TO CHANGE THE NAME OF THE COMPANY FROM M&M CONTRACTORS FLORIDA  
LLC TO M&M SOLUTIONS FLORIDA LLC.

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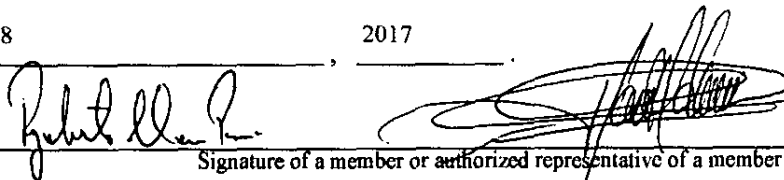
**E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)**

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:  
(b) The 90th day after the record is filed.

Dated APRIL 28, 2017

  
Signature of a member or authorized representative of a member

RIGOBERTO MORENO AND HOLLMAN MATOS  
Typed or printed name of signee

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17 MAY 30 AM 10:39  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA