## 117000085695

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SECRETARY OF STATE AHASSEE FIRMINAL

S Warren

MAY - 2 2017

## COVER LETTER .

TO:		gistration Sec ision of Corp		
SHR	JECT:	MTN WAR	E, LLC	
300	JECI.		Name of Limite	ed Liability Company
			Amendment and fee(s) are subm	
			JOSEF MYSOREWALA	
				Name of Person
			LAW OFFICE OF JOSEF N	M MYSOREWALA, PLLC
				Firm/Company
			1750 CORAL WAY, 2ND I	FLOOR
				Address
			MIAMI, FLORIDA 33145	
			• • • • • • • • • • • • • • • • • • • •	City/State and Zip Code
			JOSEFM@LAWJMM.COM	
			E-mail address: (to	be used for future annual report notification)
For f	urther in	nformation co	oncerning this matter, please cal	1:
JOS	EF MY	SOREWALA		305 3561031 at ()
		Name of	Person	Area Code Daytime Telephone Number
Encl	osed is a	a check for the	e following amount:	·
<b>=</b> 1	\$25.00 F	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & □ \$60.00 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

MTN WARE, LLC		
( <u>Name of the Limited Li</u> (A F)	ability Company as it now appears on our reco orida Limited Liability Company)	ords.)
he Articles of Organization for this Limited Liabili	ty Company were filed on 4/17/17	and assigned
lorida document number L17000085695		
The Articles of Organization for this Limited Liability Company were filed on 4/17/17 and assigned Florida document number 117000085695  This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liability company here:  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:  (Principal office address MUST BE A STREET ADDRESS)  Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)		
. If amending name, enter the new name of the	limited liability company here:	
(A Florida 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 4/17/17 and assigned Florida document number L17000085695  This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liability company here:  The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."  Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)  Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)		
nter new principal offices address, if applicable	s Limited Liability Company were filed on 4/17/17 and assigned ass695  and the following:  ew name of the limited liability company here:  contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." ass, if applicable:  E A STREET ADDRESS)  licable:  T OFFICE BOX)  agent and/or registered office address on our records, enter the name of the egistered office address here:  Agent:  dress:  Enter Florida street address  Florida	
(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 4/17/17 and assigned Florida document number L17000085695  This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liability company here:  The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."  Enter new principal office address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)  Enter new mailing address, if applicable:  (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 registered agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  Florida		
		···
	,	
inter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX	2	
. If amending the registered agent and/or r	egistered office address on our reco	rds, enter the name of the
egistered agent and/or the new registered office	address here:	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street ada	iress
_		Florida
	Cuy	Σφ 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 Registofed

Page 1 of 3

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	YL & BL LLC	2028 HARRISON ST., STE 101	Add
		HOLLYWOOD, FLORIDA 33020	☐ Remove
			☐ Change
MGR	Y & B LLC	2028 HARRISON ST., STE. 101	
		HOLLYWOOD, FLORIDA 33020	■ Remove
			Change
			Add
			☐ Remove
			☐ Change
			□ Add
			□ Remove
			Change
			□ Remove
			TAKE D-Change
<del></del>			HAY Add Amov OF STATE  AMAY OF STATE
			OF ST
			SHO Sange

If amending any other information, enter change(s) here: (Attach additional sheets, if nece	ssary.)		
		<del></del>	
		<del></del>	
		<u>-</u>	
	<del></del>		
		<del></del>	
Effective date, if other than the date of filing:  (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 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this document's effective date on the Department of State's records.  The record specifies a delayed effective date, but not an effective time, at 12:01 at 12:01 and 13:01 and 14:01 and 15:01 and 15:0	filing.) Pursuant t date will not be	e listed as ti	3)(b) ne
Dated <u>APRIL 25</u> , 2017.	17 HA SECRE TALLA	-	- '
Signature of a member of authorized representative of a member  JOSEF M MYSOREWALA	TARY O		
Typed or printed name of signee	AN 8: 46 OF STATE E.FLORID	Ö	4
Page 3 of 3		•	

Filing Fee: \$25.00