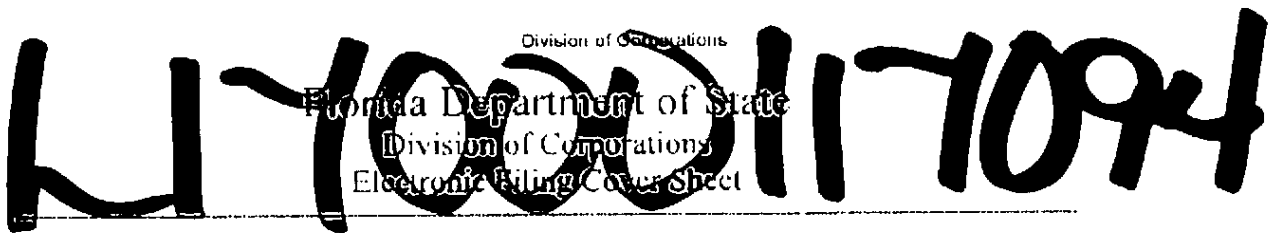


6/13/2019



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : CYAN CONSULTANTS INC.
Account Number : 120180000074
Phone : (407)346-5731
Fax Number : (407)650-3216

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: contact@cyaninc.com

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
MAKIN SALES, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

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T GLASS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MAKIN SALES, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

MARIA C. T. MONTOYA

Name of Person

CYAN CONSULTANTS INC

Firm/Company

8015 INTERNATIONAL DR UNIT 309

Address

ORLANDO, FL 32819

City/State and Zip Code

contact@cyaninc.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MELANIE A. MAKIN

at (352)

455-0044

Name of Person

Area Code

Daytime Telephone Number

APPROVED
AND
FILED

2019 JUN 13 PM 12:41

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

MAKIN SALES, 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 05/26/2017 and assigned Florida document number L17000117094.

This amendment is submitted to amend the following:

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

-N/A-

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:

1655 3RD STREET

(Principal office address MUST BE A STREET ADDRESS)

CLERMONT, FL 34711

Enter new mailing address, if applicable:

1655 3RD STREET

(Mailing address MAY BE A POST OFFICE BOX)

CLERMONT, FL 34711

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:

MAKIN, MELANIE A.

New Registered Office Address:

1655 3RD STREET

Enter Florida street address

CLERMONT

City

Florida

34711

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.

Melanie Autumn Makin

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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
N/A	N/A	N/A	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

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AND
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2019 JUN 13 PM 12:41
CLERK OF SUPERIOR COURT
STATE OF NEW YORK

2019 JUN 11 3

FILED

2019 JUN 13 PM 12:

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.

(b) The 90th day after the record is filed.

Dated JUNE 12th, 2019

Melanie Custumak Makin

Signature of a member or authorized representative of a member

MELANIE A. MAKIN, MGR

Typed or printed name of signer