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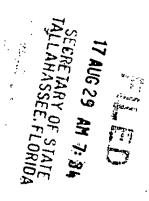
(Requestor's Name)
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(Document Number)
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COVER LETTER

то:	Registration Se Division of Cor		ı					
CHDI	PCT.	Majagualon L	LC					
SUBJECT:Name of Limited Liability Company								
The er	iclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.					
Please	return all correspo	ndence concerning this matter	to the following:					
		Me	rcedes Vazquez					
			Name of Person					
			Manager					
Firm/Company								
		I	4601 Sw 30TH Street					
			Address					
Miami, FL 33175								
		<u> </u>	City/State and Zip Code					
		E-mail address: (1	13/76 (Ch 20 CO) To be used for future annual report notif	ication)				
For fu	rther information co	oncerning this matter, please ca	ıll:					
Merce	edes Vazquez		305 898-9484 at () Area Code Daytime					
	Name of	f Person	Area Code Daytime	Telephone Number				
Enclos	sed is a check for th	e 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

	Majagualon LLC		
(<u>Name of the Limi</u>	ted Liability Company as it now appears (A Florida Limited Liability Company)	on our records.)	
The Articles of Organization for this Limited L	iability Company were filed on 07/1	13/2017	and assigned
Florida document number L1700001500172	·		
This amendment is submitted to amend the foll	owing:		
A. If amending name, enter the new name o	f the limited liability company her	<u>re</u> :	
The new name must be distinguishable and contain the v	words "Limited Liability Company," the de-	signation "LLC" or the abl	previation "L.L.C."
Enter new principal offices address, if applic	cable:		
(Principal office address MUST BE A STREE	ET ADDRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE	<u></u>	*****	
B. If amending the registered agent and registered agent and/or the new registered o		our records, enter	the name of the nev
Name of New Registered Agent:	Mercedes J. Vazquez		COPE CAH
New Registered Office Address:	14601 Sw 30TH Street		SR S
	Miami	da street address, Florida 38	TO BE IN
New Registered Agent's Signature, if changing	City Registered Agent:	RIDA	Zip Code

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>	<u>Name</u>	Address	Type of Action
MGR	MERCEDES J. VAZQUEZ	14601 SW 30 STREET MIAMI FL	■ Add
		MERCEDES VASQUEZ	■ Remove
			Change
			□ Add
			Remove
			□ Change
			Add
			Remove
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(If an effective on Mote: If the	ate, if other than date is listed, the date date inserted in the effective date on t	e must be specific his block does r	iling: c and cann not meet t	the applica	to date of fil	ing or more the	an 90 days afte	ional) er filing.) Purs is date will i	suant to to	605.0207 (isted as t
		ayed effectiv		, but no	t an effe	ctive time	, at 12:01	a.m. on t	he ea	rlier of:
he record s	specifies a dela n day after the		eu.							
the record s The 90th	n day after the	record is file		20/	Z.					
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Page 3 of 3

Filing Fee: \$25.00