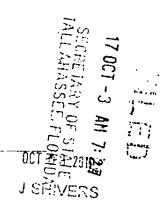


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To whom it may concern,

lam including an additional creck in case the previous one canto be used since it was returned on my bankis end due to error. I was bankis end due to error. I was told by your office that it all not reflect so in your system but not reflect so in your system but your in case it cannot be used, I will be including a new one.

Thank Your process of Character.

COVER LETTER

Division of Corp			
SUBJECT:	MOZINO CM Name of Lim	MAS LLC lited Liability Company	
	\mathcal{L}		
The enclosed Articles of A	amendment and fee(s) are sub	mitted for filing.	
Please return all correspon	dence concerning this matter	to the following:	
	Proci	110 ginzalez	
	Fierce	COASULTING	
	7735 M	N WHA St B	NZ
	Mam	Address 33100	<u> </u>
	FIRE-mail address: (City/State and Zip Code Office of the Code to be used for future annual report notif	DOMIN, COM
For further information co	ncerning this matter, please ca	all:	
PNSCIII Name of	GMACLET Person	at (<u>355)</u> 853 Area Code Davime	- UTTG ·
, and ,	. • • • • • • • • • • • • • • • • • • •	, act could have	Telephone Fullice
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)	*E! \$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, F1, 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

blazina chario	ts, LLC
(Name of the Limited Liability Compa	ny as it now appears on our records.) Diability Company)
The Articles of Organization for this Limited Liability Company Florida document number \(\frac{\lambda}{\lambda}\).	were filed on 7 28 17 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the abbreviation "LLC"
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	13210 SW 13270 AUC UNIT #2 MIQMI, FL 33180
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	13310 SW 13and Ave UNIT #2 Mami PL 33186
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	
Name of New Registered Agent:	SEE A FILE
New Registered Office Address:	Enter Florida street address

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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 $AMBR = A$	lanager authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			☐ Remove
			☐ Change
			Add
			☐ Remove
			Change
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Ffective date, if other that an effective date is listed, the date: If the date inserted in a period of the date o	ite must be specific and can this block does not meet	ot be prior to date of fil the applicable statute	ling or more than 90 days a	ptional) after filing.) Pursuant to this date will not be	605.0207 (listed as t
record specifies a de The 90th day after the		, but not an effe	ctive time, at 12:0	i a.m. on the ea	ırlier of
ated 9 9 17	Dava (4600		_
	Signature of a memi				

Page 3 of 3

Filing Fee: \$25.00