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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: M2L Private Investments LLC
Name of Limited Liability Company
The enclosed Articles of Amendment and fec(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Michelle Darr Name of Person
Name of Person
M&L Private Investments LLC
rim/Company
10412 Brentford Drive
Audicas
City/State and Zip Code
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Mark Manzonelli a1 (314) 915-5071
Mark Manzonelli, at (314) 915-5071 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
· /
✓ \$25.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) S55.00 Filing Fee & 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

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) 9-14-2017 The Articles of Organization for this Limited Liability Company were filed on _ 1700019 2083 Florida document number 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) 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: New Registered Office Address: Enter Florida street address Florida Cin 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

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	Michelle Darr	10412 Brentford Dr Tampa FL 33626	✓ Add
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Dated -	· · · · · · · · · · · · · · · · · · ·				
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	Signature of a member or auth	orized representative of a member			
	MICHELLE D.	ARR			

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