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IROS MERIS

COVER LETTER

TO: Registration Section Division of Corpora		
	Name of Limited Liability Company	
The enclosed Articles of Ame	endment and fee(s) are submitted for filing.	
Please return all corresponder	nce concerning this matter to the following:	
-	Edgar F. Ospina Name of Person Firm/Company 1810 Sw 95 terra Address Miramar, Fl 33025 City/State and Zip Code Solumaniamie amail.com E-mail address: (to be used for future angual report notification)	
_	solumaniamie amail.com	
		
For further information conce	erning this matter, please call:	
Edgar F. Name of Per	rson at (754) 2651304 Area Code Daytime Telephone Number	
Enclosed is a check for the fo	ollowing amount:	
□ \$25.00 Filing Fee □	□ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) 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

SOLUMA MIA (Name of the Limited Liability Comp (A Florida Limited	any as it now appears on our records. Liability Company)				
The Articles of Organization for this Limited Liability Company Florida document number <u>L17000222112</u> .	were filed on 10 26 2017 and assigned				
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liab	pility company here:				
SOLUMA MIA The new name must be distinguishable and contain the words "Limited Liab	MI L.L.C.				
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC" or the abbreviation "L.L.C."				
Enter new principal offices address, if applicable:	1810 sw 95 terra				
(Principal office address MUST BE A STREET ADDRESS)	Miromar Fl, 33025				
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her	1810 sw 95 terra Polivamar Fl, 33075 Office address on our records, enter the name of the new re:				
Name of New Registered Agent:	gar F.Ospina				
	SW 95 terra Enter Florida street address				
Mir	City , Florida 33025 Zip Code				
New Registered Agent's Signature, if changing Registered Agent	<u>.</u>				
I hereby accept the appointment as registered agent and agreprovisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document is				

Page 1 of 3

If Changing Registered Agent, Signa ure 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 **Type of Action Title** Name Address Danies, Rodolfo 2915 Pierce St 15 MGR ☐ Add Hollywood, F/ 33020 Remove ☐ Change Edgar F. Ospina 1810 sw 95 terra Hiromar MAdd MGR ☐ Remove ☐ Change □ Add □ Remove _□ Change ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change

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fan effective date is listed, the Note: If the date inserted i	n this block does r	not meet the ap	plicable statute	ling or more than 90 ory filing requirem	days after filing.) Pu ents, this date wil	irsuant to 6 I not be li	605.0207 isted as
locument's effective date of	n the Department	of State's reco	rds.				
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The 90th day after t			not an ene	cure unite, ac i	.2.01	circ car	
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Filing Fee: \$25.00