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COVER LETTER

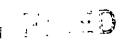
TO:	Registration Sec Division of Corp			
CUDI	MTGL, LL	C		
SUBJ	ECT:	Name of Lim	ited Liability Company	
The er	nclosed Articles of ,	Amendment and fee(s) are sub-	mitted for filing.	
Please	return all correspon	ndence concerning this matter	to the following:	
		Peter Messineo		
			Name of Person	
		Brownsberger & Messineo). LLC	
			Firm/Company	
		38349 County Road 54		
			Address	
		Zephyrhills, Florida 33542		
			City/State and Zip Code	
		peter@pm-cpa.com		
		E-mail address: (to be used for future annual report notif	ication)
For fu	orther information co	oncerning this matter, please ca	all:	
Peter	Messineo		813 788-3378 at ()	
	Name o	f Person	Area Code Daytime	: Telephone Number
Enclo	sed is a check for th	e following amount:		
■ Sí	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



2019 H.M 13 PM 6: 00

MTGL, LLC		, p	A.:
MTGL, LLC (Name of the Limited Liability Compared (A Florida Limited)	pany as it now appears on ou d Liability Company)	r'records.)	14 (TL)
The Articles of Organization for this Limited Liability Companion of the Articles of Organization for this Limited Liability Companion of the Articles of Organization for this Limited Liability Companion of the Articles of Organization for this Limited Liability Companion of the Articles of Organization for this Limited Liability Companion of the Articles of Organization for this Limited Liability Companion for this Limited Liability Companion of the Articles of Organization for this Limited Liability Companion for the Li			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lia	bility company here:		
The new name must be distinguishable and contain the words "Limited Lia	bility Company," the designati	on "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 registered agent and/or the new registered office address he		records, ente	er the name of the n
Name of New Registered Agent:			<u> </u>
New Registered Office Address:			
	Enter Florida stre	et address	
		Florida	

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

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 = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Christopher Roth		
			■ Remove
			Change
MGR	Franki Kalogianis	3343 Tuckahoe Place Holiday, Florida 34690	
			□ Remove
			Change
			Add
			Remove
			Change
			□ Remove
			Change
			□ Add
			□ Remove
			Change
			Add
			Remove
			□ Change

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n effective date te: If the da	e is listed, the date mu te inserted in this b	e date of filing: ist be specific and canno- clock does not meet the Department of State's	ot be prior to date of t he applicable statu	iling or more than 90 tory filing requiren	(optional) days after filing.) Pursu nents, this date will n	unt to 605.0207 ot be listed as
	ecifies a delaye ay after the red	d effective date, cord is filed.	but not an effe	ective time, at	12:01 a.m. on th	ne earlier o
ted May	le	· 20	19			

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Typed or printed name of signee

Filing Fee: \$25.00