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SECRETARY OF STATE
DIVISION OF CORPORATIONS

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COVER LETTER

TO:				
SUBJ	FCT·	MAHE ENTERP	PRISES LLC	
Division of Corporations SUBJECT: MAHE ENTERPRISES LLC Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: HENRY A. VELASQUEZ Name of Person MAHE ENTERPRISES LLC Firm/Company				
The en	nclosed Articles of A	Amendment and fee(s) are	submitted for filing.	
Please	e return all correspor	ndence concerning this ma	tter to the following:	
		Hen	IRY A. VELA SQUEZ	
			Name of Person	
		MAH	IE ENTERPRISES	LLC
			Firm/Company	
		202 RIV	IERA CIRCLE	
			Address	
		<u>weston</u>	pt 33326	
			City/State and Zip Code	
		<u>catodi-</u>	to 123 leyahoo.com)
				ification)
For fu	rther information co	ncerning this matter, pleas	e call:	
	HENRY A.	VELASQUEZ	at (_860_)_4492	2363
	Name of	Person	Area Code Daytir	ne Telephone Number
Enclos	ed is a check for the	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

MAHE ENTERPI		
(Name of the Limited Liability Comp (A Florida Limited	pany as it now appears on our records.) I Liability Company)	
The Articles of Organization for this Limited Liability Compan Florida document number <u>L 18000083736</u> .		and assigned
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 Liab	pility 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)		SEC VISI
		Q RE
		- Le
Enter new mailing address, if applicable:		R ROC
(Mailing address MAY BE A POST OFFICE BOX)		9 22
		20 N.S
B. If amending the registered agent and/or registered office address he		<u>r the name of the new</u>
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	Emer Pioriaa sireet aaaress	
	, Florida _	Zip Code
New Registered Agent's Signature, if changing Registered Agent	•	
I hereby accept the appointment as registered agent and ag provisions 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.	e performance of my duties, and I am provided for in Chapter 605, F.S. Ol	familiar with and r, if this document is

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> <u>being added</u> <u>or removed from our records</u>:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Diana M Albarello Velasquez	202 Riviera Circle #202 Weston FL 33326	□ Add
	•		🔀 Remove
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