

L18 000 120 723

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

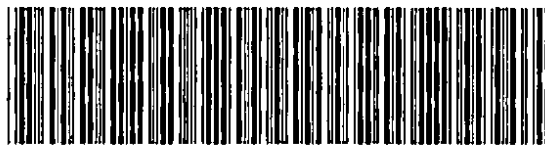
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JAN 10 2020
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COVER LETTER

Registration Section
Division of Corporations

MIJ TRADING CORP. LLC

EFFECT: _____
Name of Limited Liability Company

Enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

MAIKEL GERGES

Name of Person

MIJ TRADING CORP. LLC

Firm/Company

916 NE 79TH STREET

Address

EL PORTAL, FL 33138

City/State and Zip Code

chari@projectorworlds.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Anna Plasencia

786

619-7127

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

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)

☐ \$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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

MJJ TRADING CORP. LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

Articles of Organization for this Limited Liability Company were filed on 05/15/2017 and assigned
document number L18000120723.

An amendment is submitted to amend the following:

Amending name, enter the new name of the limited liability company here:

New name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

For new principal offices address, if applicable:

Principal office address MUST BE A STREET ADDRESS)

For new mailing address, if applicable:

Mailing address MAY BE A POST OFFICE BOX)

MJJ TRADING CORP, LLC

PO Box 380483

Miami, FL 33238

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

City

Zip Code

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
understand 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

ending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added
moved from our records:

R = Manager

BR = Authorized Member

<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
Adel Mitry	177 NE 86TH STREET	<input type="checkbox"/> Add
	EL PORTAL, FL 33138	<input checked="" type="checkbox"/> Remove
		<input type="checkbox"/> Change
Isis S Arsanious	177 NE 86TH STREET	<input type="checkbox"/> Add
	EL PORTAL, FL 33138	<input checked="" type="checkbox"/> Remove
		<input type="checkbox"/> Change
Lidia A Mitry	177 NE 86TH STREET	<input type="checkbox"/> Add
	EL PORTAL, FL 33138	<input checked="" type="checkbox"/> Remove
		<input type="checkbox"/> Change
Amalia S Arsanious	177 NE 86TH STREET	<input type="checkbox"/> Add
	EL PORTAL, FL 33138	<input checked="" type="checkbox"/> Remove
		<input type="checkbox"/> Change
Maikel Gerges	PO Box 380483	<input checked="" type="checkbox"/> Add
	Miami, FL 33238	<input type="checkbox"/> Remove
		<input type="checkbox"/> Change
		<input type="checkbox"/> Add
		<input type="checkbox"/> Remove
		<input type="checkbox"/> Change

amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

[illegible]

effective date, if other than the date of filing: _____ (optional)
 If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)
note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the
 document's effective date on the Department of State's records.

record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
The 90th day after the record is filed.

led 11-27-19

27-19

X

Signature of a member or authorized

Maikel Genes

Signature of a member or authorized representative of a member

Maikel Gerges

Typed or printed name of signee