## L18000142042

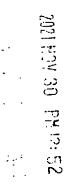
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## **COVER LETTER**

TO:

**Registration Section** 

P.O. Box 6327

Tallahassee, FL 32314

Division of Co	rporations		
Morningsta			
SOBJECT.	Name of Lin	nited Liability Company	·············
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Carmen Martinez		
		Name of Person	<del></del>
	Mornigstar 3 LLC		
		Firm/Company	
	6881 SW 130th Terrace		
		Address	
	Miami Florida 33156		
		City/State and Zip Code	
	cmartinez6881@gmail.com		
		to be used for future annual report notification	, 2
For further information c	concerning this matter, please c	all;	, Z
Ariel Martinez		305 772-3842	K0 4 30
Name o	of Person	Area Code Daytime Telep	,
Enclosed is a check for t	ka Callannia a maganta		– ; ਪੰ ਲੁ
	-	The same of the sa	, N
■ \$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 Addre	Section	Street Address: Registration Section	
Division of C	Corporations	Division of Corporat	ions

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Morningstar 3 LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on  $\frac{06/08/2018}{}$ and assigned Florida document number \_\_\_\_L18000142042 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: N/A The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." N/A Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) N/A 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: N/A Name of New Registered Agent: N/A New Registered Office Address: Enter Florida street address 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	Ariel Martinez	6881 SW 130 Terrace Miami, Fl. 33156	■ Add
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record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the is filed.	earlier of: (	(b) The 90	)th day at	fter the
November 15 2021				

Filing Fee: \$25.00