1180CC: 156314

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	—
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	—
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SECRETARY OF STATE
AND ARRESSEE, FUORIDA

COVER LETTER

MW HOLD SUBJECT:	DINGS COMPANY LLC
3000ECT:	Name of Limited Liability Company
The enclosed Articles of a	Amendment and fee(s) are submitted for filing.
Please return all correspon	ndence concerning this matter to the following:
	Melissa A. Senkowski
	Name of Person
	Howard & Howard Attorneys PLLC
	Firm/Company
	450 West Fourth Street
	Address
	Royal Oak, Michigan 48067
	City/State and Zip Code
	ms3@h2law.com
	E-mail address: (to be used for future annual report notification)
For further information ed	oncerning this matter, please call:
Joseph P. Michniacki	248 723-0335 at ()
Name of	Person Area Code Daytime Telephone Number
Enclosed is a check for th	e following amount:
☑ \$25.00 Filing Fee	S30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section

Division of Corporations

TO:

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



December 6, 2019

MELISSA A SENKOWSKI 450 W 4 ST ROYAL OAK, MI 48067

SUBJECT: MW HOLDING COMPANY, LLC

Ref. Number: L18000156314

We have received your document for MW HOLDING COMPANY, LLC and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$213.75.

The fees to reinstate the limited liability company are as follows: \$100 reinstatement fee; \$138.75 filing fee for current year. Therefore, the total amount due to reinstatement the limited liability company at this time is \$238.75. — PAID

Please include an additional \$5.00 for each certificate of status requested (optional).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tracy L Lemieux Regulatory Specialist II

Letter Number: 919A00024790

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www.sunbiz.org

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MW HOLDING COMPANY LLC			
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our Liability Company)	rccords.)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L180000156314</u>	and assigned		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
MW HOLDINGS COMPANY LLC		<u>- 51 %</u>	
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation	n "Itt C" or the	obreviation "L.L.C."
Enter new principal offices address, if applicable:	2366 Gulfshore Blvd.	<u> </u>	
(Principal office address MUST BE A STREET ADDRESS)	Apt. 504	- 65.20 - 65.30 - 65	
	Naples, Florida 34103	(7))	LL:
Enter new mailing address, if applicable:	2366 Gulfshore Blvd.	FLORIDA FLORIDA	C C
(Mailing address MAY BE A POST OFFICE BOX)	Naples, Florida 34103	- -	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her	ffice address on our re <u>e</u> :	ecords, <u>ente</u>	r the name of the n
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida street	address	
	City	, Florida _	Zip Code
	Cuy		zip code

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
			Remove
			Change
			Remove
			Change
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Effective date, if other the fan effective date is listed, the content of the date inserted in document's effective date of	this block does r	not meet the appl	icable statutory:	or more than 90 day	(optional) ys after filing.) Pursua ts, this date will no	ant to 605.0207 (to the listed as t
e record specifies a do The 90th day after th	alayed effective record is file	ve date, but n led.	ot an effectiv	ve time, at 12	:01 a.m. on th	e earlier of:
November 6		2019				
				ative of a member		

Page 3 of 3

Filing Fee: \$25.00