118000163476

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2018 SEP 13 PN 2: 87

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COVER LETTER

TO:	Registration S Division of Co					
eun in	Masanna,	LLC				
SUBJE	C1:	Name of Lim	ited Liability Company			
The enc	losed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please r	eturn all corresp	ondence concerning this matter	to the following:			
		Marjory Remy				
			Name of Person			
		Masanna, LLC	None of Person			
			Firm/Company			
		133 NE 2nd Ave #1513				
			Address			
		Miami, Florida 33132				
			City/State and Zip Code			
		marjoryremy@yahoo.con	n		2018 FACE	
		E-mail address: (to be used for future annual report notil	ication}	SEP	-1
For furth	her information of	concerning this matter, please ca	all:		P	P
Marjory	Remy		954 592-2290 at ()			17
	Name o	of Person	Area Code Daytime	: Telephone Number	2: 87	769 A
Enclosed	d is a check for t	he following amount:				
□ \$25.	.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	of Status &	

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, F4, 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

Masanna, 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 7/5/2018 ____ and assigned Florida document number L18000163476 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Masianna, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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 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 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 com the 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>	Name	Address	Type of Action
MGR	Ray Louis	133 NE 2nd Ave #1513 Miami, Florida 33132	Add
			■ Remove
			□ Change
MGR	Marjory Remy —————	133 NE 2nd Ave #1513 Miami, Florida 33132	Add
			☐ Remove
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Cantantes	2018	/.	/		
September 5	,	7 /	•		
September 5	·				
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Filing Fee: \$25.00