

418000168626

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TALLAHASSEE, FLORIDA

AUG 06 2018

S. YOUNG

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MUYUNID 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:

Form fields for contact information: Name of Person (Joseph Villate), Firm/Company (Joseph Villate CPA), Address (250 Catalonia Avenue, STE 506), City/State and Zip Code (Coral Gables, FL 33134), E-mail address (villateCPA@bellsouth.net)

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For further information concerning this matter, please call:

Contact details: Joseph Villate, Name of Person; 305 541-4714 at () Daytime Telephone Number

Enclosed is a check for the following amount:

- Filing fee options: \$25.00 Filing Fee, \$30.00 Filing Fee & Certificate of Status, \$55.00 Filing Fee & Certified Copy, \$60.00 Filing Fee, Certificate of Status & Certified Copy

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**

MUYUNID 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 07/12/2018 and assigned Florida document number L18000168626.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability 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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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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 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>	<u>Address</u>	<u>Type of Action</u>
P	OLMEDO, ENRIQUE	7925 NW 12TH ST STE 109	<input type="checkbox"/> Add
		Doral, FL 33126	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
P	CORREA, MARIANELA	7925 NW 12TH ST STE 109	<input checked="" type="checkbox"/> Add
		DORAL, FL 33126	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

Multiple horizontal lines for entering amendments.

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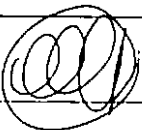
E. Effective date, if other than the date of filing: _____ **(optional)**

(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.

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

Dated JULY 24 _____, 2018

X 

Signature of a member or authorized representative of a member

REGISTERED AGENT

ENRIQUE OJEDA

Typed or printed name of signee