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| (Cit | y/State/Zip/Phone | #) |
| PICK-UP | ☐ WAIT | MAIL |
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| Special Instructions to | Filing Officer: | |
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COVER LETTER

| eun rect | INTI MGK | 1 LLC | |
|----------------------------|--|---|---|
| SUBJECT: | Name of Lim | ited Liability Company | |
| | | | |
| The enclosed Articles of | Amendment and fee(s) are sub | mitted for filing. | |
| Please return all correspo | ndence concerning this matter | to the following: | |
| | | | |
| | CLAUDI | O INTILANGELO | |
| | | Name of Person | |
| | エル | ri MGM LLC | |
| | | Firm/Company | |
| | 618 SW | 3RD STREET, CAPE (| ORAL |
| | | Address | |
| | CAPE | CORAL FL 33991 | |
| | | City/State and Zip Code | |
| | U mail addrawy | to be used for future annual report notif | inulan) |
| | | • | (Catton) |
| For further information c | oncerning this matter, please c | all: | |
| INTILANGE | ELO CLAUDIO | at (786) 603 94 | 58 |
| Name o | f Person | Area Code Daytime | Telephone Number |
| | | | |
| Enclosed is a check for th | ne following amount: | | |
| \$25.00 Filing Fee | ☐ \$30.00 Filing Fee & Certificate of Status | □ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | S60.00 Filing Fee. Certificate of Sta Certified Copy (additional copy is ex |
| 31 .11 | ING ADDDECC. | etheet/count | Ch ADDDESC |

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

| INTI MGM L | |
|---|---|
| (Name of the Limited Liability Compan (A Florida Limited Li | y as it now appears on our records 1 25 P P: 39 |
| The Articles of Organization for this Limited Liability Company v Florida document number <u>L 18000 231391</u> . | vere filed on 10/01/2018: and assigned |
| This amendment is submitted to amend the following: | |
| A. If amending name, enter the new name of the limited liabil | ity company here: |
| The new name must be distinguishable and contain the words "Limited Liabilit | y Company," the designation "LLC" or the abbreviation "L.L.C." |
| Enter new principal offices address, if applicable: | 618 SW 3RD STREET |
| (Principal office address MUST BE A STREET ADDRESS) | CAPE C'ORAL FL 33991 |
| Enter new mailing address, if applicable: | 618 SW BRD STREET |
| (Mailing address MAY BE A POST OFFICE BOX) | CAPE CORAL FL 33991 |
| B. If amending the registered agent and/or registered off 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 provisions of all statutes relative to the proper and complete paccept the obligations of my position as registered agent as publing filed to merely reflect a change in the registered office a company has been notified in writing of this change. | performance of my duties, and I am familiar with and covided for in Chapter 605, F.S. Or, if this document is |

If Changing Registered Agent, Signature of New Registered Agent

| <u>or removed</u> | from our records: | | |
|--------------------|----------------------------|------------------------|-------------------|
| MGR = M $AMBR = A$ | anager uthorized Member | | |
| <u>Title</u> | <u>Name</u> | Address | Type of Action |
| MGR | GARCIA DANIELA | 1513 NE 27 TH OT | O Add |
| | | Ponpano BEACH FL 33064 | ≌ Remove |
| | | | Change |
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| | CHANGE ADRESS TO: | |
|-------------------------------|--|-------------|
| | 618 SW 3RD STREET | |
| | CAPE CORAL FL 33991 | |
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| an effective o ote: If the | te, if other than the date of filing: | |
| | pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the e day after the record is filed. | arlier c |
| nted | JAU 18 2018 Signature of a member or authorized representative of a member | _ |
| | CLAUDIO INTILANGELO | |

Page 3 of 3

Filing Fee: \$25.00