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COVER LETTER

TO:	Registration Se Division of Cor			
enib i	MAYFIG L			
3003	ECT:		ited Liability Company	
The er	nclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
		GUILLERMO R GUTIER	REZ	
			Name of Person	
		GUTIERREZ AND ASSO	CIATES SERVICES INC	
			Firm/Company	
		4640 SW 155TH PLACE	. ,	
			Address	
		MIAMI, FLORIDA 33185	-4568	
		GUILLARE@YAHOO.CO	City/State and Zip Code M	····
		E-mail address: (to be used for future annual report notif	ication)
For fu	rther information c	oncerning this matter, please ca	all:	
GUILLERMO R GUTIERREZ			305 223-4289	
	Name o	f Person	Area Code Daytime	Telephone Number
Enclos	sed is a check for th	e following amount:		
□ S2	5.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fec, Certificate of Status & Certified Copy (additional copy is enclosed)

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

MAYFIG LLC			ِ مُ
(Name of the Limit	ed Liability Company as it now (A Florida Limited Liability Cor	rappears on our records.) npany)	
The Articles of Organization for this Limited L	iability Company were filed	on NOVEMBER 2, 2018	and assigned
forida document number L18000258386			
his amendment is submitted to amend the foll	owing:		2 16
. If amending name, enter the new name o	f the limited liability comp	oany here:	
he new name must be distinguishable and contain the v	vords "Limited Liability Compan	y," the designation "LLC" or the	abbreviation "L.L.C."
inter new principal offices address, if applic	<u></u>	OODLAND RD PALM SPRIN	GS, FL 33461
<u>Principal office address MUST BE A STREE</u>	ET ADDRESS)		-
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		OODLAND RD PALM SPRIN	GS, FL 33461
3. If amending the registered agent and registered agent and/or the new registered of New Registered Agent:	or registered office addiffice address here: MAYLEN RODRIGUEZ		r the name of the
	261 WOODLAND RD		
New Registered Office Address:	E STATE OF THE STA		
	PALM SPRINGS	. Florida	33461
	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>	Address	Type of Action
MGR	MAYLEN FIGUEROA	1737 SW 102ND PLACE	Add
	-	MIAMI, FLORIDA 33165	
-			■ Remove
			Change
MGR	MAYLEN RODRIGUEZ	264 WOODLAND RD	Add
		PALM SPRINGS, FL 33461	
			Remove
			☐ Change
			Add
			☐ Remove
			Change
			□ Remove
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			<u>. </u>			
		DE	CEMBER 11, 201	18		
<u>te:</u> If the d	ate inserted in this	he date of filing: must be specific and cannot block does not meet the Department of State's	ne applicable statu	filing or more than 90 day tory filing requiremen	(optional) ys after filing.) Pur its, this date will	suant to 605.020 not be listed a
he 90th o	day after the re	red effective date, ecord is filed.				:he earlier o
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		2.5	or administrate repr			

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Filing Fee: \$25.00