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(Red	questor's Name)	
(Add	dress)	
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(City	y/State/Zip/Phone	#)
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COVER LETTER

Division of Cor	rporations	•			
M&H EA SUBJECT:	MERPRISES LLC				
SODALCA.	Name of Lin	nited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	ELSI TORREALBA				
		Name of Person		-	
	NELPISERVICES INC				
		Firm/Company		-	
	2393 S CONGRESS AVE	STE 223			
	 	Address		_	
	PALM SPRINGS, FL 334	()6			
	City/State and Zip Code ELSI@NELPISERVICES.ET				
	E-mail address: (to be used for future annual report no	tification)	2010 DEC 17	3
For further information e	concerning this matter, please c	all:			
ELSITORREALBA		561 6323042		7x	
Name o	of Person		ne Telephone Number	2:31	•
Enclosed is a check for the	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	ne of Status &	

MAILING ADDRESS:

TO:

Registration Section

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

M&H ENTERPRISES 44C

(Name of the Limited I (A l	jability Company as it now appears on our records.) florida Limited Liability Company)	<u></u>				
The Articles of Organization for this Limited Liabil Florida document number 1.18000262725	lity Company were filed on 11/08/2018	and assigned				
This amendment is submitted to amend the following	ng:					
A. If amending name, enter the new name of the	e limited liability company here:					
The new name must be distinguishable and contain the words	"Limited Liability Company," the designation "LLC" or th	ne abbreviation "L.L.C."				
Enter new principal offices address, if applicable	e:					
(Principal office address MUST BE A STREET A	DDRESS)					
Enter new mailing address, if applicable:						
Mailing address MAY BE A POST OFFICE BO.	<u> </u>					
		52. 29				
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our records, <u>en</u>					
registered agent didn't the new registered office	audress here.					
Name of New Registered Agent:		PH 2				
New Registered Office Address:		<u>ω</u>				
- ·	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, <u>enter the title, name, and address of each person</u> <u>being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	EDUARDO MEDIOLA JR	1308 HYPOLUXO RD HYPOLUXO, FL 33462	■ Add
			☐ Remove
			☐ Change
MGR	EDUARDO MENDIOLA-ROCHA	1308 HYPOLUXO RD HYPOLUXO, FL 33462	
			■ Remove
			☐ Change
			Remove
			D Add
			□ Remove 1
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		12/07/20	018					
ffective date, if other than the ffective date is listed, the date	the date of fil	ling:		00	(option	al)		.s.0303
Sote: If the date inserted in this locument's effective date on the	s block does no	ot meet the ap	plicable statut					
e record specifies a dela The 90th day after the r			not an effe	ective time, a	at 12:01 a.d	m. on th	e earl	ier of
12/11 Dated		2018						
	${a}$	_·	endiola.					

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00