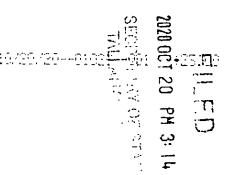
L1900010456L

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LA. 11/24/20

COVER LETTER

Registration Section Division of Corporations

TO:

élib le <i>e</i> t.	MHP ALL SOLUTIONS	LLC	
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles	of Amendment and fee(s) are sub	omitted for filing.	
Please return all corre	espondence concerning this matter	to the following:	
	RICHA	RD HERNANDEZ PERERA	
		Name of Person	
	МНР /	ALL SOLUTIONS LLC	
		Firm/Company	
	10690	SW 24TH STREET	
		Address	
	MIA	MI, FL 33165	
	·	City/State and Zip Code	
	richan	dhernandez430@yahoo.com	
	E-mail address: (to be used for future annual report no	tification)
For further information	on concerning this matter, please c	all:	
RICHARD H	ERNANDEZ PERERA	786 973-5657	
Nar	ne of Person	Area Code Daytir	ne Telephone Number
Enclosed is a check for	or the following amount:		
■ \$25.00 Filing Fee	© \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
P.O. Box 6	on Section f Corporations	Street Address: Registration So Division of Co The Centre of 2415 N. Monro	rporations

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MHP ALL SOLUTIONS LLC

(Name of the Limited (A	Liability Company Florida Limited Lia	y as it now appears on our rec ability Company)	cords.)	
The Articles of Organization for this Limited Liab Florida document number L19000104566	oility Company w	vere filed on <u>04/24/2019</u>		and assigned
This amendment is submitted to amend the follow	ring:			
A. If amending name, enter the new name of the	he li <u>mited liabili</u>	ity company here:		
N/A				
he new name must be distinguishable and contain the word	ds "Limited Liabilit	y Company," the designation "l	LLC" or the abbrevi	ation "L.L.C."
Enter new principal offices address, if applicab	ole:	237 SW 13TH STREE	Τ	
Principal office address MUST BE A STREET.		APT 109		020
Time party file unaress is con the file in the second		MIAMI, FL 33130	#1. 	S 71
Enter new mailing address, if applicable:		N/A	2 · · · · · · · · · · · · · · · · · · ·	20 P
(Mailing address MAY BE A POST OFFICE BOX)				ر ني
				_
3. If amending the registered agent and/or reg gent and/or the new registered office address		ldress on our records, <u>en</u>	ter the name of	the new regis
Name of New Registered Agent:	N/A			
New Registered Office Address:	237 SW 13	TH STREET APT 109		
		Enter Florida street ad	dress	<u> </u>
	міамі		Florida <u>33130</u>	
		City	7	ip 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
AMBR	RICHARD HERNANDEZ PERER	237 SW 13TH STREET	
		APT 109	
		MIAMI, FL 33130	_
			□Add
			□ Remove
			□ Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			Add
			Remove
			Change
	·		
			□Remove
			□Change

Note:	tive date, if other than the date of filing:
rd is t	
Dated	1 <u>october; 3</u> , <u>2020</u> .
	Signature of a member or authorized representative of a member