L19000109004

(Requestor's Name)		
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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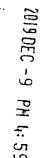
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JAN 1 4 2020







COVER LETTER

	gistration Sec vision of Corp			
SUBJECT:	MH ORLAN	NDO, LLC		
SOLUTE		Name of Limi	ited Liability Company	
The enclose	d Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please retur	n all correspor	ndence concerning this matter	to the following:	
		VICTORIA MORAES		
			Name of Person	
		ASSELFIS INTERNATIO	NAL LLC	
			Firm/Company	
		7901 KINGSPOINTE PAR	RKWAY SUITE 10	
			Address	·
		ORLANDO FL 32819		
		VICTORIA@ASSELFIS.C	City/State and Zip Code OM	
			to be used for future annual report notifi	cation)
For further	information co	ncerning this matter, please ca	all:	
VICTORIA	MORAES		407 8261034 at ()	
	Name of	Person	Area Code Daytime	Telephone Number
Enclosed is	a check for the	e following amount:		
□ \$25.00	Filing Fec	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, 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

MH ORLANDO, LLC		
(<u>Name of the Limited Lial</u> (A Flor	bility Company as it now appears on our records.) rida Limited Liability Company)	
The Articles of Organization for this Limited Liability	y Company were filed on 04/15/2019	and assigned
Florida document number L19000109004		
This amendment is submitted to amend the following	:	
A. If amending name, enter the new name of the li	imited liability company here:	
MONTHARA ENTERTAINMENT LLC		
The new name must be distinguishable and contain the words "L	Limited Liability Company," the designation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:		2018
(Principal office address MUST BE A STREET AD	DRESS)	
		0
		0 17
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	·	59
		<u> </u>
B. If amending the registered agent and/or re-	gistered office address on our records, en	ter the name of the nev
registered agent and/or the new registered office a	ddress 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>	Address	Type of Action
AMBR	ROBERTO DE MORAES, CHARLES	4984 LONGMEADOW PARK ST ORLANDO. FL 32839	Add
			Remove
			☐ Change
			Remove
			Change
		Remove	
			Change
			Add
		 	Remove
			Change
			Add
		Ren	Remove
			□ Change
		Add	
		Remove	
			Change

or it amending any other morning.	on, carer enauge(a) never	(Attach additional sheets, if necessary.)
		
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E. Effective date, if other than the d	late of filing:	(optional) date of filing or more than 90 days after filing.) Pursuant to 605.0207 (
Note: If the date inserted in this bloc document's effective date on the Dep	ck does not meet the applicable	le statutory filing requirements, this date will not be listed as t
f the record specifies a delayed b) The 90th day after the reco	effective date, but not a rd is filed.	an effective time, at 12:01 a.m. on the earlier of:
DECEMBER 04	2019	
Dated Law May Lamp	Mile di Silli Si	zed representative of a member
CAIO HARA - MEMBE		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00