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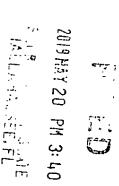
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R. WHITE.
JUN 0 5 2019



COVER LETTER

Division of Corporations
SUBJECT: MG Howetech LLC Name of Limited Enability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Haghel J. Gamez. Guigou -
MG-Howetech LLC:
2031 NE 5th Street
Cape Coval FL 33909 City/State and Zip Code Monskel-gomez @ Unhoo- Com
E-mul address: (to be used for future amual report notification)
Mayke J. Courez Cuiga at (239) 288-8858
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \text{S30.00 Filing Fee & Certificate of Status & Certificate of Status & Certified Copy (additional copy is enclosed)} \$\Bigcup \text{S60.00 Filing Fee.} \\ \text{Certified Copy (additional copy is enclosed)}}\$

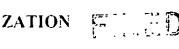
MAILING ADDRESS:

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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 []



	Ur			
MG Home	tech_L	LC-		20 PH 3: 40
(Name of the Limited Liab) (A Flori	oility Company as ida Limited Liabil	it now appear: ity Company)	s on ourtrecords:) * TAGE::	ASSET
The Articles of Organization for this Limited Liability		e filed on	4/23/19	and assigned
Florida document number <u>L 1900</u> ito0	<u>)</u>			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the lin	mited liability	company he	<u>re</u> :	
The new name must be distinguishable and contain the words "Li	imited Liability C	ompany," the de	signation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADD	<u>DRESS)</u>			
	_			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)				
	_			
B. If amending the registered agent and/or regi registered agent and/or the new registered office add	istered office dress here:	address on	our records, <u>er</u>	nter the name of the nev
Name of New Registered Agent:				
New Registered Office Address:		F . FI .		·
		Enter Floria	la street address	
	-	in .	Florida	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

Address Type of Action Title Name 2031 NE 5th Street XAM Cape Coral FL 33909 Remove □ Change MGR ☐ Change □ Add ☐ Remove ☐ Change ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change \square Add ☐ Remove _ 🗆 Change

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n effe <u>ite:</u>	ve date, if other than the date of filing:
reco	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlie 90th day after the record is filed.
ted _	May: 15 2019
	Signature of a member or authorized representative of a member
	Moyhel. J. Gomez Guigou Typed or printed name of signee

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Page 3 of 3

Filing Fee: \$25.00