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COVER LETTER

TO:	Registration Section Division of Corporations
SUBJ	ECT: Migmitude Company Name of Limited Liability Company
The er	aclosed Articles of Amendment and fee(s) are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	Adrian Avila
	Name of Person
	miamituntloats, LCC
	2015 Biscayne Blvo#112
	Migmi, FL, 33137
	Migmi, FC, 33137 Origin & Migmi Fun Hugts. com E-mail address: (to be used for future annual report notification)
For fu	rther information concerning this matter, please call:
~ *	Advisor Avil a at (95) 297-5215 Name of Person Area Code Daytime Telephone Number
	sed is a check for the following amount:
C \$2	25.00 Filing Fee

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations Clifton Building



August 13, 2019

ADRIAN AVILA 2045 BISCAYNE BLVD. #142 MIAMI, FL 33137

SUBJECT: MIAMIFUNFLOATS, LLC

Ref. Number: L19000168611

We have received your document and check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), Authorized Person (AP), or Authorized Representative (AR).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

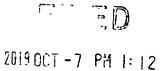
Claretha Golden Regulatory Specialist II

Letter Number: 219A00016699

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www.sunbiz.org

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Miami FUNFLO	ay as it now appears on our records.)
The Articles of Organization for this Limited Liability Company Florida document number <u>L1900168611</u> .	were filed on $\frac{06/27/2019}{\text{and assigned}}$
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	lity company here:
The new name must be distinguishable and contain the words "Limited Liabili Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	ity Company," the designation "LLC" or the abbreviation "L.L.C." 2045 Biscayne BLVD # 142 Miami, FL 33137
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2015 BIJCAYNE BLVD #112 Miami, FC 33137
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	
Name of New Registered Agent: New Registered Office Address: 2045	BiscayNe BLVD #142 Enter Florida street address 1 am i , Florida 33 1-37 City Zin 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	Adrian Avila	20901 San.	🖸 Add
		Simeon way AT	202 Remove
		Miami, FZ 33179	Change
MGR	Stephanie A. Vega	1810 SW 82 Ferrac	L □ Add
		Miramar, FL	🗆 Remove
		33025	Change
AMBR	<u>Craig</u> Hagen	819 NE 17th Way	Æ ⊅Add
	y	Fort Lauderdale, Fo	
		33304	Change
			
		#4	🗆 Remove
			🗆 Add
			☐ Remove
			Change
			🗆 Add
			Remove
			🗀 Change

	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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<u>ote:</u> If	e date, if other than the date of filing:
recoi	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier o Oth day after the record is filed.
	A 21 8 COLO A
ated	August 0 . 2019
	Signature of a member or authorized representative of a member
	A A C A C A C A C A C A C A C A C A C A
	operation to the state of the s

Page 3 of 3

Filing Fee: \$25.00