

L19 006 211509

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2022 JUL 29 PM 3:00
CLERK OF DISTRICT COURT
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[Handwritten signature]



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 22, 2022

VICENTE CASTRO
2301 NW 87TH AVE SUITE 401
DORAL, FL 33172

SUBJECT: AKUMEN MIH LLC
Ref. Number: L19000211509

We have received your document for AKUMEN MIH LLC. However, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$25.00. Your document will be retained in our pending file. Please return a copy of this letter to ensure that your check is properly credited.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tammi Cline
Regulatory Specialist II Supervisor

Letter Number: 922A00018657

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2022 JUL 29 PM 3:00

NOT RECORDED
IN MISSISSIPPI, FL



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

2022 JUL 27 PM 12:01

July 13, 2022

VICENTE CASTRO
2301 NW 87TH AVE SUITE 401
DORAL, FL 33172

SUBJECT: AKUMEN MIH LLC
Ref. Number: L19000211509

We have received your document for AKUMEN MIH LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s). All pages must be returned in order to file the document.

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

Querida R Silas
Regulatory Specialist II

Letter Number: 022A00015603

FILED

2022 JUL 29 PM 3:00

CLERK OF THE COURT
TALLAHASSEE, FL



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 28, 2022

VICENTE CASTRO
2301 NW 87TH AVE SUITE 401
DORAL, FL 33172

AUG 18 2022

SUBJECT: AKUMEN MIH LLC
Ref. Number: L19000211509

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

You failed to make the correction(s) requested in our previous letter.

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY.

The current name of the entity is as referenced above. Please correct your document accordingly.

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.

Querida R Silas
Regulatory Specialist II

Letter Number: 722A00016899

FILED
2022 JUL 29 PM 3:00
TALLAHASSEE, FL
DIVISION OF STATE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Akumen MIH LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Vicente Castro
Name of Person

Akumen MIH LLC
Firm/Company

2301 NW 17 Ave Ste 401
Address

Doral, FL 33172
City/State and Zip Code

vcastro@akumeninsurance.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Vicente Castro at (305) 456-9756
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$25.00 Filing Fee ☐ \$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 Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

FILED
2022 JUL 29 PM 3:00
TALLAHASSEE, FL

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Akumen mih LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on _____ and assigned
Florida document number L9000211509.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

N/A

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

N/A

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address 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>	<u>Address</u>	<u>Type of Action</u>
D	Maria Alvarez	2301 NW 87 Ave Ste 401 Doral, FL 33172	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

FILED
2022 JUL 29 PM 3:00
TALLAHASSEE, FL

2022 JUL 29 PM 3:00
TALLAHASSEE FL
SEAL OF STATE

FILED
2022 JUL 29 PM 3:00
CLERK OF DISTRICT COURT
TALLAHASSEE FL

Effective date, if other than the date of filing: _____ (Optional)
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated August 8 2022

Signature of a member or authorized representative of a member

Vicente Castro

Typed or printed name of signee