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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LIESER SKAFF ALEXANDER, PLLC

Account Number : I20150000057 Phone

: (813)280-1256 : (813)251-8715 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: mcilwain6@gmail.com

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COVER LETTER

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		perties LLC		
SUBJECT	`i	Name of Limi	ted Liability Company	
			No. 10 Miles	
		Amendment and fee(s) are sub		
Please retu	ırn all correspo	ndence concerning this matter	to the following:	
		Ghada Skaff		
			Name of Person	
		Lieser Skaff Alexander		
			Firm/Company	
		403 N. Howard Ave.		2
			Address	-
		Tampa, FL 33606		. a € € € € € € € € € € € € € € € € € € €
			City/State and Zip Code	
		mcilwain6@gmail.com E-mail address: (to be used for future annual report notification)	1 7
For further	r information o	concerning this matter, please of	all:	76 35 71
Ghada Sk	aff		813 280-1256	
	Name o	f Person	Area Code Daytime Telephone Number	
Enclosed i	is a check for ti	he following amount:		
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F F	Mailing Address Registration Division of C P.O. Box 632 Fallahassee,	Section Corporations 27	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303)

MCMS Properties LLC

H220002314873

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

The Articles of Organization for this Limited Liability Comp. Florida document number L19000214517	oany were filed on August	28, 2019 and	d assig	ned
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited	liability company here:			
N/A				
The new name must be distinguishable and contain the words "Limited	Liability Company," the design	ation "LLC" or the abbreviation	m "L.L.	C."
Enter new principal offices address, if applicable:	302 N. Howard Ave	·	<u> م ن</u>	2
Principal office address MUST BE A STREET ADDRES	S) Tampa, FL 33606		_ v_	
				}=
		,	<u> </u>	-1
Enter new mailing address, if applicable:	302 N. Howard Ave		7.7:	<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)	Tampa, FL 33606		35.	=
			<u> </u>	
B. If amending the registered agent and/or registered of agent and/or the new registered office address here: Name of New Registered Agent: Lieser Ska	fice address on our recor	ds, enter the name of th	e new	<u>registe</u>
New Registered Office Address: 403 N. Ho	ward Ave.			
New Registered Office Address.	Enter Florida s	treet address		
Tamma		, Florida 33606		
Tampa		rhifnix		

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

Fax: 18132518715

Title	Name	Address	Type of Action
AMBR	Matthew Ahrens	302 N. Howard Ave.	□Add
		Tampa, FL 33606	□Remove
			■Change
AMBR	Sara Aluens	302 N. Howard Ave.	
		Tampa, FL 33606	□Remove
			■ Change
AMBR	Michael Mcilwain	302 N. Howard Ave.	
		Tampa, FL 33606	DRémove -
			≘Change
AMBR	Cristina Mcilwain	302 N. Howard Ave.	
		Tampa, FL 33606	□Remove
			≣Change
AMBR	Kara Ford	302 N. Howard Ave.	□Add
		Tampa, FL 33606	□Remove
			<u></u> ⊞ Change
AMBR	Steven Ford	302 N. Howard Ave.	□Add
		Tampa, FL 33606	□Remove
			■ Change

Fax: 18132518715

Michael Mcilwain

AMBR - Matthew Warnken - 302 N. Howard Ave., Tampa, FL 3360	06 (Change)
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ctive date, if other than the date of filing:	(optional) ling or more than 90 days after filing.) Pursuant to 60
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ment's effective date on the Department of State's records.	
ord specifies a delayed effective date, but not an effective time, at 12:0	01 a.m. on the earlier of: (b) The 90th day aft
filed.	
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Typed or printed name of signee