

L20000032680

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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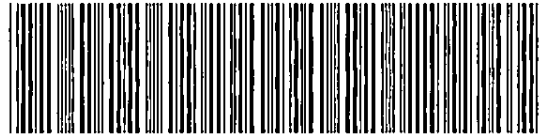
(Business Entity Name)

(Document Number)

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**DATE:** 2/28/20

**NAME:** MP & MI GLOBAL ENTERPRISES, LLC

**TYPE OF FILING:** AMENDED AND RESTATED ARTICLES

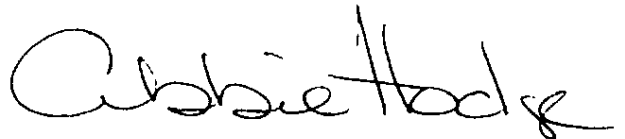
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**ACCOUNT:** FCA000000015

**AUTHORIZATION:** ABBIE/PAUL HODGE



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## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** MP & MI Global Enterprises, L.L.C. FL: L20000033680  
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:

Joaquin A. Sosa

Name of Person

JAS.LAW, LLC

Firm/Company

4430 SW 83rd Avenue

Address

Miami, FL 33155

City/State and Zip Code

jasosa@bellsouth.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Joaquin A. Sosa 818 262-5853  
Name of Person at ( ) 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

ARTICLES OF AMENDMENT AND *Re Stated*  
TO  
ARTICLES OF ORGANIZATION  
OF

MP & MI Global Enterprises, L.L.C.  
(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 01/28/2020 and assigned Florida document number L20000033680 . E.I.N. 84-4675223

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: 4430 SW 83rd Avenue  
Miami, FL 33155  
*(Principal office address MUST BE A STREET ADDRESS)*

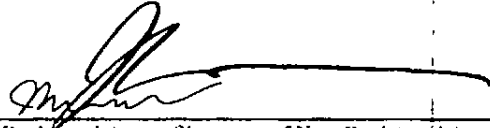
Enter new mailing address, if applicable: 1825 Ponce de Leon Blvd.  
Ste. 500 c/o Sosa  
Coral Gables, FL 33134  
*(Mailing address MAY BE A POST OFFICE BOX)*

**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: Joaquin A. Sosa  
New Registered Office Address: 4430 SW 83rd Avenue  
*Enter Florida street address*  
Miami, Florida 33155  
*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>
AMBR	Martha Partida Sanchez	4430 SW 83rd Avenue, Miami, FL 33155	<input type="checkbox"/> Add
		40% Ownership	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	Jose Luis Medinilla	4430 SW 83rd Avenue, Miami, FL 33155	<input type="checkbox"/> Add
		50% Ownership	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	Gerardo Medinilla Partida	4430 SW 83rd Ave., Miami, FL 33155	<input type="checkbox"/> Add
		10% Ownership	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AR	JAS.LAW, LLC by Joaquin Sosa	1825 Ponce de Leon Blvd. Ste. 500	<input type="checkbox"/> Add
		Coral Gables, FL 33134	<input type="checkbox"/> Remove
		0% Ownership	<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
			<input type="checkbox"/> Change

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

Articles of Amendment and Reinstatement adding EIN 84-4675223

**Martha Partida Sanchez is both a Member and Manager with 40% Ownership**

**Jose Luis Medinilla is both a Member and Manager with 50% Ownership**

**Gerardo Medinilla Partida is both a Member and Manager with 10% Ownership**

**JAS.LAW, LLC by Joaquin A. Sosa is an Authorized Representative with 0% Ownership and may act in  
behave of the LLC for all matters including the opening of bank accounts.**

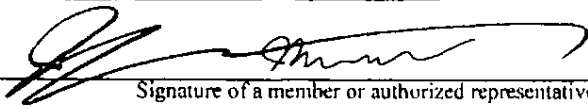
**E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)**

(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 02/27 \_\_\_\_\_, 2020



Signature of a member or authorized representative of a member

Joaquin A. Sosa

Typed or printed name of signee

**Filing Fee: \$25.00**