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| (Req | uestor's Name) | |
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| (City | /State/Zip/Phon | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bus | iness Entity Nar | me) |
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| Certified Copies | Certificate | s of Status |
| Special Instructions to F | iling Officer: | |
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TO:

Tallahassee, FL 32314

| TO: Registration Se Division of Cor | | | |
|--|---|---|--|
| MG Mana | gement Group USA LLC | | |
| SUBJECT: | | | |
| | Name of Lim | ited Liability Company | |
| The enclosed Articles of | Amendment and fee(s) are sub | mitted for filing. | |
| Please return all correspo | ondence concerning this matter | to the following: | |
| | Mark Murray | | |
| | | Name of Person | |
| | MG Management Group | USA LLC | |
| | | Firm/Company | |
| | | Address | |
| | victormurrayfl@gmail.con E-mail address: (| City/State and Zip Code to be used for future annual report no | otification) |
| For further information c | oncerning this matter, please ca | all; | |
| Mark Murray | | 813 842 7288 | |
| Name o | f Person | at () Area Code Dayti | me Telephone Number |
| Enclosed is a check for the | ne 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 Addres | | Street Address: | |
| Registration S | | Registration S | |
| Division of C P.O. Box 632 | • | Division of Co The Centre of | • |

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

6

| MG Management Group USA LLC | | | برد | |
|---|---|--|---------------------------|--------------------------|
| (Name of the Limited | I Liability Compar A Florida Limited L | ny av it now appears of hability Company) | n our records.) | |
| The Articles of Organization for this Limited Lia Florida document number L20000086495 This amendment is submitted to amend the follows: | · | were filed on | rh 20, 2020 | and assigned |
| A. If amending name, enter the new name of t | the limited liabi | lity company here | : | |
| The new name must be distinguishable and contain the wo | rds "Limited Liabil: | ity Company," the desig | mation "LLC" or the | abbreviation "L.L.C." |
| Enter new principal offices address, if applica | ble: | MG Management | Group USA LLC | |
| (Principal office address MUST BE A STREET | | 6105 Memorial H | wy Suite A 5 | <u> </u> |
| AFTINCIPAL OFFICE ADARESS STOST BE A STREET ADA | 7117171112387 | Tampa FL 33615 | | |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | | MG Management 6105 Memorial H | | |
| | | Tampa FL 33615 | wy Suite A S | |
| B. If amending the registered agent and/or regagent and/or the new registered office address | ~ | ddress on our reco | ords, <u>enter the na</u> | me of the new registered |
| Name of New Registered Agent: | | | | |
| New Registered Office Address: | 6105 Memorial | I Hwy Suite A 5 | | |
| - | | Enter Florida | street address | |
| | Tampa | | Florida _ | 33615 |
| | | City | | Zip Code |
| New Registered Agent's Signature, if changing Re | egistered 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 |
|--------------|-------------|-------------|----------------|
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| E. Effective (If an effecti | date, if other than the date of filing: |
| document | 's effective date on the Department of State's records. |
| f the record specord is filed. | pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the |
| A | pril 13 2020 |
| | · · |