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## **COVER LETTER**

Registration Section Division of Corporations

Tallahassee, FL 32314

TO:

POLETINA SUBJECT:				
Sobject.	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ndence concerning this matter	to the following:		
	Marta Ojeda			
		Name of Person		
	POLETINA LLC			
		Firn/Company		
	6501 SW 96th St.			
		Address		
	Miami, FL 33156			
	m.ojedahernandez@gmail.c	City/State and Zip Code		
		to be used for future annual report noti	fication)	
For further information co	oncerning this matter, please c			
Marta Ojeda		305 987-8162 at ()		
Name of	l Person	at () Area Code Daytim	e Telephone Number	
Enclosed is a check for th	ie following amount:			
☐ \$25.00 Filing Fee	☐ \$30.00 Filing Fee &	S55.00 Filing Fee &	☐ \$60.00 Filing Fee,	
already	Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)	
NATURE A LE		C4 A 4.4.4		
<u>Mailing Addres</u> Registration S		Street Address: Registration Section		
Division of Corporations		Division of Corporations		
P.O. Box 6327		The Centre of Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

POLETINA 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 April 28, 2020 and assigned Florida document number L20000114320 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: MIMATELLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 2937 SW 27 Ave. #303, Coconut Grove, FL 33133 Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 2937 SW 27 Ave. #303, Coconut Grove, FL 33133 Enter new mailing address, if applicable: (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: Marta Ojeda Name of New Registered Agent: 2937 SW 27 Ave. #303 New Registered Office Address: Enter Florida street address

## 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.

City

Coconut Grove

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	Marta Ojeda	2937 SW 27 Ave. #303, Coconut Grove, FL 33156	🗆 Add
			□Remove
AMBR	Marta Ojeda	6501 SW 96 St., Miami, FL 33156	🗆 Add
			=Remove
			□Change
		<del> </del>	□Add
			□Remove
		<del></del>	Change
····			□Add
			Remove
			□Change
			DAdd
			□Remove
			□Change
			□Add
			□Remove
			□Change

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