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| (Requestor's Name) | |
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| (Address) | 80034609 |
| (Address) | 00001000 |
| (City/State/Zip/Phone #) | |
| PICK-UP WAIT MAIL | 06/12/200101 |
| (Business Entity Name) | |
| (Document Number) | S TALIENT |
| Certified Copies Certificates of Status | 797 05 500 |
| Special Instructions to Filing Officer: | |
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COVER LETTER

Registration Section Division of Corporations

TO:

| SUBJECT: | Maikel"s F | ort Myers LLC | |
|--------------------------------------|--|---|---|
| SUBJECT: | Name of Lim | ited Liability Company | |
| The enclosed Articles of An | nendment and fee(s) are sub | omitted for filing. | |
| Please return all correspond | ence concerning this matter | to the following: | |
| | | Ramon Martinez | |
| | | Name of Person | |
| | Romar | Enterprise &Management | |
| | | Firm/Company | |
| | 6 | 407 Amundson St | |
| | | Address | · - |
| | | Tampa, Florida 33634 | |
| | | City/State and Zip Code | |
| | ramon@ | romarenterprise.com | |
| | E-mail address: (| to be used for future annual report n | otification) |
| For further information con- | cerning this matter, please c | all: | |
| Ramon Mart | inez | 813 at () | 882-4219 |
| Name of Pe | erson | Area Code Day | time Telephone Number |
| Enclosed is a check for the t | 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 Sec | | Street Address: Registration S | |
| Division of Cor | porations | Division of C | • |
| P.O. Box 6327 Tallahassee, FL | 32314 | The Centre of 2415 N. Mon | Tallahassee roe Street, Suite 810 |

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Maikel's Fort Myers, 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 May 06.2020 and assigned Florida document number L2000123208 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 Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 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: Norys Lorites Calderon Name of New Registered Agent: 4401 W Idlewild Ave 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.

Tampa

City

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 |
|--------------|--------------------------|---------------------|----------------|
| Ambr | Aldo Gonzalez Cabrera | 8403 N Lois Ave | ■Add |
| | | Tampa, FI 33614 | Remove |
| | | | ■ Change |
| MGR | Norys L Lorites Calderon | 4401 W Idlewild Ave | Add |
| | | Tampa, FI 33614 | ■ Remove |
| | | | ■ Change |
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| record spec I is filed. | ifies a delayed effective dat | e, but not an effective | time, at 12:01 a.m. or | the earlier of: (b) The | 90th day after the |
| ated | June 08 | 2020 | · | | |
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| _ | Sign | ature of a member or aut | horized representative o | La member | |

Filing Fee: \$25.00