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COVER LETTER

Division of Cor	porations				
Matiq Real	Estate, LLC	•			
Name of Limited Liability Company					
he enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
lease return all correspo	ondence concerning this matter	to the following:			
	Zachary Henry				
		Name of Person			
	Matiq Real Estate, LLC				
		Firm/Company			
	9630 NW 2nd ST Apt 306				
		Address			
	Pembroke Pines, FL 33024	1			
		City/State and Zip Code			
	mansahenrydi@gmail.com	to be used for future annual report noti	fication)		
For further information c	oncerning this matter, please co	•	,		
Zachary Henry		305 479-7901 at ()			
Name o	f Person	Area Code Daytime	e 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		

ŤΟ:

Registration Section

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 TO ARTICLES OF ORGANIZATION OF

Matiq Real Estate, 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 _____06/01/2020 and assigned Florida document number L20000148666 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Mansa Henry Development & Investment, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) N/A 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: N/A Name of New Registered Agent: N/A 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

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

Title	Name	Address	Type of Action
	N/A		□Add
			□Remove
			□Add
			□Remove
			□Change
			□Add
			□Remove
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			□Remove
			[[Change

Effective date, if other than the date of filing:	N//	·
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. 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 ord is filed. Dated October 21 . 2010 . Signature of a member or authorized representative of a member		
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	Dated <u>Ø</u> c	loher 21 . 2020 .
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Zachary Henry		Signature of a member or authorized representative of a member
		Zachary Henry