L20000 252765

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COVER LETTER

TO:	Registration S Division of Co			
SUBJE		R TECH HOLDINGS LLC		
SUBJE		Name of Lin	nited Liability Company	
The encl	losed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please re	eturn all corresp	ondence concerning this matter	to the following:	
		ALEJANDRO VELEZ		
			Name of Person	
		MCA MANAGER INC.		
			Firm/Company	
		175 SW 7TH ST SUITE 2	112	
			Address	
		MIAMI, FL 33130		
			City/State and Zip Code	
		AVELEZ@MIDTOWN-R		
		E-mail address: (to be used for future annual report noti	fication)
For furth	er information of	concerning this matter, please c	all:	
ALEJA	NDRO VELEZ		305 961-1115 E2	
	Name (of Person	Area Code Daytim	e Telephone Number
Enclosed	l is a check for t	he following amount:		
≘ \$25.	00 Filing Fee	S30.00 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:		Registration Sec	ction .

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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

MIRAMAR TECH HOLDINGS LLC

(Name of the Limited Liability Compar (A Florida Limited L	ny as it now appears on ou iability Company)	ur records.)	
The Articles of Organization for this Limited Liability Company Florida document number L20000252765 This amendment is submitted to amend the following:		. B	1
4 Ifdi	l:4	5. Z	
A. If amending name, enter the new name of the limited liabi	iity company nere:		
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designat		_
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 a agent and/or the new registered office address here:	ddress on our records	s, enter the name of the new registe	- ered
Name of New Registered Agent:			_
New Registered Office Address:	Enter Florida stre	cet address	_
	City	Florida 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 amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added</u> or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	MCA MIRAMAR LLC	175 SW 7TH SUITE 2112	
		MIAMI, FL 33130	■Remove
			□Change
MGR	MCA MANAGER INC	175 SW 7TH SUITE 2112	= Add
		MIAMI FL 33130	□Remove
			□Change
			DAdd
			□Remove
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			្តិ ប្
			□Change
			□Change
			🗀 Add
			□Remove
			□Change

Effective date, if other than the date of filing:					.				_
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 605.02 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed 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 5 2020		 						<u> </u>	_
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Dated			ective date, but	not an effective	time, at 12:01	a.m. on the ca	rlier of: (b) T	he 90th day a	fter th
Signature of a member or authorized representative of a member	Oated	CTOBER 5		. 2029		-			
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Filing Fee: \$25.00