

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H20000354828 3)))



H200003548283ABC%

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019 Phone : (305)552-5973 Fax Number : (305)675-5944

**Enter the email address for this business entity to be used for Future annual report mailings. Enter only one email address please.

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MIAMI DISPLAY LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

OCT 1 3 7020

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Miami Display LLC			
(Name of the Limited Liability C (A Plonda Lin	ompany as it now appears on mited Liability Company)	OUT PECOT(S.)	
The Articles of Organization for this Limited Liability Com Florida document number L20000257063	pany were filed on AUGU	ST 19,2020	_ and assigned
_			
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 design	ation "LLC" or the abbre	viation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRES	(S)		
			
Enter new mailing address, if applicable:		SEC	2020 d
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>	<u> </u>
		() ± 1	72
	_	:	<u> </u>
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	lice address on our record	ds, enter the name o	fthe new registered
Name of New Registered Agent:	 -	~ 	
New Registered Office Address:	Enter Florida su	reet address	· · · · · · · · · · · · · · · · · · ·
	www. , 1971au 3.7		
	Çity	, 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, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

3052201440

<u>Title</u>	Name	Address	Type of Action
MGR	ROBERTO DAUBAR	15123 SW 35TH TER	
		MIAMI, FL 33185	
			☐ Change
MGR	ANGBLA DAUBAR	15123 SW 35TH TER	🗀 Add
	MIAMI, FL 33185	□Remove	
	···	= Chenge	
		· · · · · · · · · · · · · · · · · · ·	О Remove
			Dbdd
	·		CRemove
			□Change
			□Add
			Change
			DAdd
			□Remove
			- Change

	nding any other information, enter change(s) here: (Attach additional sneets, if nucessary.)
_	
_	
_	
_	
_	
	
_	
_	
	
_	
_	
f an effect	e date, if other than the date of filing:
documen	f the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as any selfective date on the Department of State's records.
e record : rd is filed	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 d.
Dated	9-2-,2020
	Signature of a member or authorized representative of a member
	ANGELA DAUBAR

LAZARUS CORPORATE

PAGE 04/04

10/13/2020 13:03 3052201440

Filing Fee: \$25.00