



Office Use Only



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COVER LETTER

TO:

Registration Section

Div	ision of Cor	porations				
	M&T INTERNATIONAL IMPORT LLC					
SUBJECT:	Name of Limited Liability Company					
The enclosed	f Articles of a	Amendment and fee(s) are sub	mitted for filing.			
Please return	all correspo	ndence concerning this matter	to the following:			
		NORGEN DAVID MARÇ	OUEZ BONALDE '			
			Name of Derson			
		5406 SW 127TH PL	Pirm Company			
Address						
MIAMI / FLORIDA - 33175						
		norgendm@gmail.com	City/State and Zip Code to be used for future annual report no	attention)		
For further i	nformation c	oncerning this matter, please of	·	micatory		
NORGEN D	DAVID MAR	QUEZ BONALDE	786 2520604 at ()			
	Name of	Person		me Telephone Number		
Enclosed is	a check for th	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)		
	iling Addres		Street Address: Registration S	ection		
Registration Section Division of Corporations			Division of Corporations			
	D. Box 632		The Centre of			
Ta	llahassee, I	L 32314	2415 N. Monr	oe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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r 15, 2020 and assigned
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on "LLC" or the abbreviation "L.L.C."
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enter the name of the new registere
t address
, 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 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
			□Add
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ffecti an eff	ve date, if other than the date of filing:
ocum	ent's effective date on the Department of State's records.
recore	d 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
ated_	Mach 01 2024
	Suprature of a member or authorized representative of a member
	Sunature of a member or authorized representative of a member Norgen David Marquez Bonalde