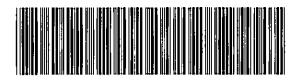
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COVER LETTER

	PLEX USA LLC Name of Lim	ited Liability Company	:	
	Name of Lim	ited Liability Company		
ticles of a				
	Amendment and fee(s) are sub	mitted for filing.		
correspor	ndence concerning this matter	to the following:		
	Luis Apa			
	· · · · · · · · · · · · · · · · · · ·	Name of Person		
	Miami Dupley USA LLC			
		Firm/Company		
	2108 NE 123RD STREET			
		Address		
	NORTH MIAMI, FL 3318	31		
		City/State and Zip Code	A A SI . II	
	loanmiami@gmail.com			
	E-mail address: (to be used for future annual repor	t notification)	
mation co	ncerning this matter, please c	all:		
	305 766-2912			
Name of	Person	Area Code Di	aytime Telephone Number	
eck for the	e following amount:			
g Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
		Street Addres Registration		
on of Co	orporations	_	Corporations	
			of Tallahassee	
	Name of the sek for the g Fee Address ration So on of Co ox 6327	Luis Apa Miami Duplex USA LLC 2108 NE 123RD STREET NORTH MIAMI, FL 3318 loanmiami@gmail.com E-mail address: (mation concerning this matter, please compared to the following amount: g Fee \$30.00 Filing Fee &	Miami Duplex USA LLC Firm/Company 2108 NE 123RD STREET Address NORTH MIAMI, FL 33181 City/State and Zip Code Joanmiami@gmail.com E-mail address: (to be used for future annual report mation concerning this matter, please call: Name of Person at (305) 766-29 Area Code Area Code Certificate of Status Certified Copy radditional copy is enclosed. Address: ration Section on of Corporations on 6327 Name of Person Registration Division of The Centre	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MIAMI DUPLEX USA 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 ______01/15/2021 _____ and assigned Florida document number __1.21000032975 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: (i,j)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: Name of New Registered Agent: 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.

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
MGR	MESERTECA USA LLC	2108 NE 123RD ST. NORTH MIAMI, FL 33181	🗆 Add
			=Remove
			□Change
MGR	NEW MIRACLE LLC	2108 NE 123RD ST NORTH MIAMI, FL 33181	🗃 Add
			□Remove
			🗆 Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

D. If an	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
(If an e <u>Note</u>	optional) effective date, if other than the date of filing: (optional) 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 605,0207 (3)(6) If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ment's effective date on the Department of State's records.
f the reco record is	ord 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 filed.
Dated	d August 17th . 2021
	Signature of a member of authorized representative of a member
	Luis Apa
	Lyned or printed name of signee

Filing Fee: \$25.00