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(Requestor's Name) (Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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COVER LETTER

TO: Registration Se Division of Co			
SUBJECT: M	ILAMONI		
SUBJECT:		ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Mylene V	an Wermeskerken Name of Person	
	MILAMO	M LLC Firm/Company	
	915 N Fr	ranklin St Apt 16	p2
	Tampa	FL 33602 City/State and Zip Code	
	Myleneva	in W D g mail. Com	(instina)
For further information c	oncerning this matter, please co		realion,
Mylene Van	Wermeskerken	at (<u>72.7</u>) 3.07 Area Code Daytim	1000
Name o	f Person	Area Code Daytim	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)

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

MI	LAMON I
(Name of the Limite	d Liability Company as it now appears on our records.) A Florida Limited Liability Company)
	ability Company were filed on <u>Feb 17 / 2021</u> and assigned <u>D 961</u> . wing:
the new name must be distinguishable and contain the wo	ords "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applica	able:
(Principal office address MUST BE A STREET	(ADDRESS)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B B. If amending the registered agent and/or reagent and/or the new registered office address	gistered office address on our records, enter the name of the new registered
Name of New Registered Agent:	Mylene van Wermeskerken
New Registered Office Address:	915 N Franklin Street Apt 1602
	Tampe , Florida 33602 . City Zip Code
New Registered Agent's Signature, if changing Re	egistered Agent:
provisions of all statutes relative to the proper accept the obligations of my position as regist	l agent and agree to act in this capacity. I further agree to comply with the r and complete performance of my duties, and I am familiar with and tered agent as provided for in Chapter 605, F.S. Or, if this document is egistered office address, I hereby confirm that the limited liability 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

Title	Name	Address	Type of Action
AP	Shaler Nemenoff	915 N Franklin Street	🗆 Add
		Tampa, FL	TRemove
			□Change
MGR	Mylene van Wermeskerk	en 915 N Franklin Street	126 Add
		Apt 1602 Tampa, FL 331	___\Remove
			□Change
			□Remove
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ifies a delaye	d effective da	te, but not :	an effective	e time, at 13	2:01 a.m. on	the carlier o	fi (b) The	90th day aft	er the
June	29	<u>/</u>].	202	<u>. ð</u> .					
	_/								
	Sign	paletre of a m	ember or au	thorized rep	resentative of	a member			
	date is listed, the date inserted effective date	date is listed, the date must be date inserted in this block effective date on the Departities a delayed effective da	date is listed, the date must be specific and date inserted in this block does not meffective date on the Department of Stiffies a delayed effective date, but not a first a delayed effective date.	date is listed, the date must be specific and cannot be produce inserted in this block does not meet the appetfective date on the Department of State's reconsities a delayed effective date, but not an effective	Ite, if other than the date of filing: date is listed, the date must be specific and cannot be prior to date of date inserted in this block does not meet the applicable statueffective date on the Department of State's records. Ities a delayed effective date, but not an effective time, at 12	date is listed, the date must be specific and cannot be prior to date of filing or more date inserted in this block does not meet the applicable statutory filing reffective date on the Department of State's records. ities a delayed effective date, but not an effective time, at 12:01 a.m. on	ate, if other than the date of filing: date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days date inserted in this block does not meet the applicable statutory filing requirements effective date on the Department of State's records.	date, if other than the date of filing:	ste, if other than the date of filing:

Filing Fee: \$25.00