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## **COVER LETTER**

TO: Registration Se Division of Cor			
SUBJECT: MASARA)	ST ROSALES LLC		
SUBJECT: MASARAI		ited Liability Company	<u>·</u>
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	JESUS FERNANDEZ		
		Name of Person	
	MAYOUR ENVEROPMENT		
	MYOFB ENTERPRISES	Finn/Company	
	1301 SW 142 COURT	Address	
		Addition	
	MIAMI FLORIDA 33184		
		City/State and Zip Code	
	JFERNANDEZ626@COM E-mail address: (	CAST.NETJESUS FERNANDEZ to be used for future annual report not	Z tification)
For further information c	oncerning this matter, please ca	•	,
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JESUS FERNANDEZ		at (305 ) 491-6434	
Name o	f Person	Area Code Daytir	me Telephone Number
Enclosed is a check for th	ne following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing Addres</u> Registration 9		Street Address: Registration So	ection
Division of Corporations		Division of Corporations	
P.O. Box 632 Tallahassee, l		The Centre of	Tallahassee oe Street, Suite 810
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Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MASARANT ROSALES 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 03/25/2021 \_\_\_\_\_ and assigned Florida document number <u>L2100013</u>9749 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 designation "LLC" or the abbreviation "L.L.C." 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 , Florida City

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.

New Registered Agent's Signature, if changing 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>	Name	Address	Type of Action
MBR	SARAHI LOPEZ	2205 SW 63 AVENUE	<b>≘</b> Add
		MIAMI FLORIDA 33155	Remove
		1731 NW 18 TERRACE APT 3	Change
MBR	ISSAC ROBERT CRUZ AREAS	MIAMI FLORIDA 33125	
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	Signature	of a member or authorize	d representative of a mem	ber	
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