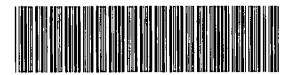
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(Re	questor's Name)	•
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

Tallahassee, FL 32314

TO:	Registration Division of C			,
(18 185 BB) (MAVEŢ	TE LLC		·
SUBJEC	J1:	Name of Lim	ited Liability Company	
The encl	osed Articles	of Amendment and fee(s) are sub	emitted for filing.	
Please re	eturn all corres	spondence concerning this matter	to the following:	
		Maria Altagracia Cuello P	ina	
			Name of Person	
		Mavette LLC		
			Firm/Company	
		15411 Honeybell Drive		
			Address	
		Winter Garden, FL 34787		
			City/State and Zip Code	
		mcuellopina@gmail.com	to be used for future annual report to	-415415
For furth	er information	n concerning this matter, please c	·	ottication
MARIA	CUELLO PIN	NA	917 453-1053 at ()	
	Name	e of Person		ime Telephone Number
Enclosed	lisacheck fo	r the following amount:		
■ \$25.	00 Filing Fee	(3 \$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 Addi Registration		Street Address:	iention
		Corporations	Registration S Division of C	
	P.O. Boy 6	•	The Centre of	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MAVELLELLC		
(Name of the Limited Liabili (A Florid	ity Company as it now appears on our records.) a Limited Liability Company)	
The Articles of Organization for this Limited Liability C	Company were filed on 04/12/2021	and assigned
Florida document number L21000168314		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
The new name must be distinguishable and contain the words "Lim	nited Liability Company," the designation "LLC" or the	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDI	RESS)	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
		لستع
B. If amending the registered agent and/or registere agent and/or the new registered office address here:	d office address on our records, enter the n	ame of the new register
gent unagor the new registered office address here.		
Name of New Registered Agent:		
Name of New Registered Agent.		11.0
New Registered Office Address:	Enter Florida street address	
	Taner Proc and Sirver tunness	02
	, Florida	Zip Code
	City	and come

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	MARIA CUELLO PINA		□Add
			■Remove
			Change
AMBR	MARIA CUELLO PINA		≅Add
			□Remove
			□Change
			□Add
			Петточе
			□Add
			□Remove
			☐Remove
			□ Add ()
			دب □Remoye
			□Change

being amended/ changed to	AUTHORIZED AGENT/MEMBER.	
		-
		
ctive date, if other than t	he date of filing:	(optional)
effective date is listed, the date to	he date of filing: must be specific and cannot be prior to date of filing or more block does not meet the applicable statutory filing r	than 90 days after filing.) Pursuant to 605.02 equirements, this date will not be listed.
ument's effective date on the	Department of State's records.	oquitomonia, uno uno montro de montro
	tive date, but not an effective time, at 12:01 a.m. on	the earlier of: (b) The 90th day after the
i filed.		
May 10th	2021	
ed		
•	- Wand A 1to. 14	
	man an ancie	

Filing Fee: \$25.00