2/1/23, 1:18 PM

Division of Corporations



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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ALLSTATE CORPORATE SERVICES CORP

Account Number : I20040000031 Phone : (800)905-9220 Fax Number : (800)906-9880

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:___

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MDB GLOBAL EXPRESS LLC

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Feb. 01, 2023 12: 27 FM #5930 F 3

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MDB GLOBAL EXPRESS LLC			
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I.	ny as it now appears on our records.) Jability Company)		
The Articles of Organization for this Limited Liability Company	were filed on 04/21/2021	and as	signed
Torida document number L21000184690	· ·		-
his amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabi	lity company here:		
he new aume must be distinguishable and contain the words "Limited Liabili	ity Company," the designation "LLC" or i	the abbreviation "L	.L.C."
Enter new principal offices address, if applicable:			
Principal office address MUST BE A STREET ADDRESS)			
inter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE BOX)		W	202
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. If amending the registered agent and/or registered office ad	ddress on our records, <u>enter the</u> i	nume of the nev	v registe
gent and/or the new registered office address here:		-	
		 ~	ယ္
Name of New Registered Agent:		12 1.	_ف_
New Registered Office Address:		•	
	Enter Florida street address		-
	, Florida	1	
<u> </u>	City	Zin 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 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
AMBR	IGOR STOLYAR	5201 THOROUGHBRED LN.	
		SOUTHWEST RANCHES, FL 13330	
			□Change
AMBR	MICHAEL BAEZ	5201 THOROUGHBRED LN.	= Add
		SOUTHWEST RANCHES, FL 33330	□Remove
			Change
			[]Remove
	•		□Change
			⊡Add
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/S/ MICHAEL BAEZ	FEBRUARY I	2023			
Signature of a member or authorized representative of a member	/S/ MICHAE	L BAEZ			

Filing Fee: \$25.00