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CORPORATE ACCESS, ____

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INC.

236 East 6th Avenue. Tallahassee, Florida 32303 P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

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COVER LETTER

Registration Section Division of Corporations

Tallahassee, FL 32314

TO:

SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sul	omitted for filing.	
	ondence concerning this matter	-	
	MARIA M. CALDERON	. ESQ.	
		Name of Person	
	LAW OFFICE OF VALE	RIA SCHVARTZMAN PA	
		Firm/Company	
	12550 BISCAYNE BLVE	STE 406	
		Address	
	MIAMI, FL 33181		
		City/State and Zip Code	
	MARIA@SCHVLAW.CO		
		to be used for future annual report notif	lication)
For further information c	oncerning this matter, please c		
MARIA M. CALDERO	N	at () 974 0114 Area Code Daytime	
Name o	f Person	Area Code Daytime	e Telephone Number
Enclosed is a check for th	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		Street Address:	
Registration S Division of C		Registration Sec Division of Corp	
P.O. Box 632		The Centre of T	

2415 N. Monroe Street, Suite 810

Tallahassee. FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(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	and assigned
Florida document number L21000241489		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	pility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC" or the	bbreviation "L.L.C."
Enter new principal offices address, if applicable:	15421 W Dixie Hwy, Bay 16	2071
(Principal office address MUST BE A STREET ADDRESS)	North Miami Beach, FL 33162	<u> </u>
		<u>(2) </u>
Enter new mailing address, if applicable:	15421 W Dixie Hwy, Bay 16	PH 12:
(Mailing address MAY BE A POST OFFICE BOX)	North Miami Beach, FL 33162	6.0
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as peing filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am provided for in Chapter 605, F.S. Or	familiar with and , if this document is

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
MGR	MG COMPANY LLC	12550 BISCAYNE BLVD STE 406	□Add
		MIAMI, FL 33181	■Remove
			□Change
MGR	MATIAS GORBAN	15421 W Dixie Hwy	≣ Add
		North Miami Beach, FL 33162	□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
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		<u> </u>	□Remove
			□Change
		-	□Add
			□Remove
			□Change

	
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ffect	ive date if other than the date of filing:
Note:	ve date, if other than the date of filing:
recor d is fi	d 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 led.
	DECEMBER 3 2021
امداما	
Dated	
Dated	- Inails
Dated	Signature of member or authorized representative of a member

Filing Fee: \$25.00