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Division of Corporations

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

**L21000476703**

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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : LEGAL TEAM PLLC  
Account Number : I20210000040  
Phone : (786)307-2393  
Fax Number : (786)524-3342

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

Email Address: ksuarez@legalteamservices.com

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
MPQ INTERNATIONAL, LLC**

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**COVER LETTER**

**TO: Registration Section**  
**Division of Corporations**

**SUBJECT: MPQ INTERNATIONAL, LLC**

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Karel Suarez, Esq.

Name of Person

The Legal Team PLLC

Firm/Company

4000 Ponce de Leon, Suite 470

Address

Coral Gables, Florida 33146

City/State and Zip Code

ksuarez@legalteamservices.com

E-mail address; (to be used for future annual report notification)

For further information concerning this matter, please call:

Erick Trelles

305 281-6074  
at ( )

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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)

**MailingAddress:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**StreetAddress:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MPQ INTERNATIONAL, 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 11/05/2021 and assigned  
Florida document number L21000476703.

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)

1006 SW 180th Terrace

Pembroke Pines, FL 33029

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1006 SW 180th Terrace

Pembroke Pines, FL 33029

**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

Zip 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 Changing Registered Agent, Signature of New Registered Agent

or removed from our records: enter the title, name, and address of each person being added

**AMBR = Authorized Member**

[illegible]

**Filing Fee: \$25.00**