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Division of Corporations

Florida Department

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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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NOV 0 8 2023 K. Brumbley TO:

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Registration Section

DIVISION OF COL	ERNATIONAL, LLC		
SUBJECT:		ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence 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 3314	46	
		City/State and Zip Code	
	ksuarez@legalteamservices	.com to be used for future annual report notification	-
For further information of	concerning this matter, please c		.,
Erick Trelles		305 281-6074 at ()	
Name o	of Person	Area Code Daytime Tele	phone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
<u>MailingAddres</u> Registration S		<u>StreetAddress:</u> Registration Section	i

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

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

To:

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MPQ INTERNATIONAL, LLC				
(Name of the Limited Liability Compa (A Florida Limited I	iny as it now appears on our records.) 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 liab	ility company here:			
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the abbreviation "L.L.C."			
Enter new principal offices address, if applicable:	Pembroke Pines, FL 33029			
(Principal office address MUST BE A STREET ADDRESS)				
Enter new mailing address, if applicable:	1006 SW 180th Terrace			
Mailing address MAY BE A POST OFFICE BOX)	Pembroke Pines, FL 33029			
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: Name of New Registered Agent:	address on our records, enter the name of the new regist			
New Registered Office Address:				
New Ideastrica Office Address.	Enter Florida street address			
	Cuv . Florida ZipCode			

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.

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Trainchung Aumorized rerson(s) aumorized to manage, enter the title, name, and address of each person-being added or removed from our records:

MGR = Manager AMBR = Authorized Member

To:

<u>Title</u>	Name	Address	Type of Action
MGR	ANA CARIDAD MARRERO	1006 SW 180th Terrace	∃ Add
		Pembroke Pines, FL 33029	
	***************************************		□Add
			Remove
			□ Add
			Remove
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Īo:

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