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Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

L2100041603

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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

Certificate of Status	0
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Page Count	04
Estimated Charge	\$25.00

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2024 MAR -5 AM 10:35
SECRETARY OF STATE
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RECEIVED
2024 MAR -5 PM 12:11
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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MAR 06 2024
T. LEMIEUX

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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 Blvd

Address

Coral Gables, FL 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:

Karel Suarez

786

307-2393

Name of Person

at (_____)

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)

Mailing Address:

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

Street Address:

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

03-17010378F94B

**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)

This amendment is submitted to amend the following:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

NORTH FORT MYERS, FL 33917

NORTH FORT MYERS, FL 33917

Zip Code

If Changing Registered Agent, Signature of New Registered Agent

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Name(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>	<u>Type of Action</u>
PST	MILTON DANIEL PERALTA	103 DANIELS LANE	☐ Add
		NORTH FORT MYERS, FL 33917	☒ Remove
			☐ Change
MGR	MAURO ANGELO CONFETTI	103 DANIELS LANE	☐ Add
		NORTH FORT MYERS, FL 33917	☒ Remove
			☐ Change
MGR	ANA CARIDAD MARRERO	103 DANIELS LANE	☐ Add
		NORTH FORT MYERS, FL 33917	☐ Remove
			☒ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

[illegible]

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated February 27, 2024

DocuSigned by

15

Signature of a member or authorized representative of a member

Mikol Daniel Peralta

Typed or printed name of signee

Filing Fee: \$25.00