Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

Account Number : 120000000145 Phone : (305)444-4994 Fax Number : (305)328-4774

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Email Address: \_\_\_\_\_

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MONOFLO MEXICO S DE RL DE CV LLC

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January 11, 2022

### FLORIDA DEPARTMENT OF STATE

MONOFLO MEXICO S DE RL DE CV LLC Division of Corporations 4217 CENTER KEY DR APT 818 WINTER PARK, FL 32792

SUBJECT: MONOFLO MEXICO S DE RL DE CV LLC

REF: L21000533664

We received your electronically transmitted document. Eowever, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The person designated as registered agent in the document and the person signing as registered agent must be the same.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Stacy Prather Regulatory Specialist III

FAX Aud. #: H22000012771 Letter Number: 722A00000778

# ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION OF

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MONOFLO MEXICO S DE RL DE CV 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 12/21/2021 and assigned. Florida document number L21000533664 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." 13109 BOULDER WOODS CIRCLE Enter new principal offices address, if applicable: ORLANDO, FL 32874 (Principal office address MUST BE A STREET ADDRESS) 13109 BOULDER WOODS CIRCLE Enter new mailing address, if applicable: ORLANDO, FL 32824 (Mailing address MAY BE A POST OFFICE BOX) 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: MICHELE FRANCESCO STARGUZZI Name of New Registered Agent: 13109 BOULDER WOODS CIRCLE New Registered Office Address: Enter Florida street address , Florida <sup>32824</sup> ORLANDO

### New Registered Agent's Signature, if changing Registered Agent:

Page: 4 of 6

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

2022-01-11 16:15:21 GMT

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### If amending Authorized Person(s) authorized to manage, enter the fitte, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

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<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Michelle Francesco Starguzzi	13109 BOULDER WOODS CIRCLE	<b>≣</b> ∧dd
		ORLANDO, FL 32824	🗆 Remove
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AMBR Donnell	Donnell Curtis Wadsley [1]	4217 CENTER KEY DR APT 818	
		WINTER PARK, FL 32792	≣Remove
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ianc: Note:	tive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursu the date inserted in this block does not meet the applicable statutory filing requirements, this date will not's effective date on the Department of State's records.	ant to 605.020 of be listed a
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e reco	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th i.	day after the
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	Signature of a member or authorized representative of a member	<del>_</del>