L220000 21571

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COVER LETTER

TO:

Registration Section

Division of Co	rporations				
MID20, L	LC				
SUBJECT:	Name of Lin	nited Liability Company			
The enclosed Articles of	l'Amendment and fee(s) are sub	omitted for filing.			
Please return all corresp	ondence concerning this matter	to the following:			
	Veronica Potenti				
		Name of Person			
	MID20, LLC				
		Firm/Company			
	2495 East Commercial Blv	vd			
		Address			
_	Fort Lauderdale, FL 33308	\$			
•		City/State and Zip Code			~ >
	vpotenti@doublepeonstruct	ion.com to be used for future annual report not	(figation)		022
For further information (concerning this matter, please c		meatizity		
Veronica Potenti		954 325-8079		1.2	18 8H
Name (of Person	Area Code Daytin	ne Telephone Number		Ċ ⊒x
Enclosed is a check for t	be following genount:			17.4	S
S25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Fili Certificate Certified ((additional c	e of Status	
Mailing Addre Registration Division 8f (Section	Street Address: Registration Se Division of Co			
P.O. Box 632 Tallahassee,	27	The Centre of 1		0	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MID20, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

		نِ رَ
The Articles of Organization for this Limited Liability (Company were filed on 1/5/2022	and assigned
Florida document number L22000021571		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	
•		
The new name most be distinguishable and contain the words "Lir	mited 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 ADD	RESS)	
Enter new mailing address, if applicable:		
· · · · · · · · · · · · · · · · · · ·		
(Mailing address MAY BE A POST OFFICE BOX)		
(Mailing address MAY BE A POST OFFICE BOX)		
(Muiling address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registere	ed office address on our records, <u>en</u>	
Muiling address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered	ed office address on our records, <u>en</u>	
(Muiling address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered agent and/or the new registered office address here:	ed office address on our records, <u>en</u>	iter the name of the new regist
Muiling address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered	ed office address on our records, <u>en</u>	iter the name of the new regist
Muiling address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered agent and/or the new registered office address here:	ed office address on our records, <u>en</u>	iter the name of the new regist
(Muiling address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered agent and/or the new registered office address here: Name of New Registered Agent:	ed office address on our records, <u>en</u> Enter Florida street ad	iter the name of the new regist

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

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>	<u>Name</u>	Address	Type of Action
MGR	Alessandro Potenti	2495 East Commercial Blvd	■Add
		Fort Lauderdale, FI, 33308	□Remove
			□ Change
			□Add
			[]Remove
			□Change
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ctive date, if other than (the date of filing: must be specific and cannot be price	retailate of filing as more	(optional)	
e: If the date inserted in this	s block does not meet the appli	cable statutory filing re	quirements, this date will	not be listed
ament's effective date on the	e Department of State's record	S	•	
ord specifies a delayed effec	ctive date, but not an effective	time at 12:01 a.m. on t'	he carlier of: (b) The One	h day attar
filed.	our date, out her an encoure	ime, at 12.01 u.m. on d	ic carnet of, (b) The 300	n day aner
•				
June 1	2022			
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A FV II				
	Signature of a member or auth			

Filing Fee: \$25.00