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(Re	questor's Name)	
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PICK-UP		MAIL
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(Do	cument Number)	
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Certified Copies	Certificates	of Status
Special Instructions to I	Filing Officer:	
	Office Use Onl	у



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COVER LETTER

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TO: Registration Section Division of Corporations

UBJECT:		Name of Limited Liability Company
	:	
he enclosed	Articles of /	Amendment and fee(s) are submitted for filing.
lease return	all correspon	ndence concerning this matter to the following:
		Cathlin Pina
	,	Name of Person
	· · .	
		Firm/Company
		1423 SE 16th PI # 101
	1 - 1 ₀ 1 -	Address
		Cape Coral, FL 33990

City/State and Zip Code

Lucidinvestmentsandpm@gmail.com

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

For further information concerning this matter, please call:

Cathlin Pina		239 440-2338	
	Name of Person	at () Area Code	Daytime Telephone Number

Enclosed is a check for the following amount:

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■ \$25.00 Filing Fee	🗇 \$30.00 Filing Fee &	□ \$55.00 Filing Fee &	🔲 \$60.00 Fi
	Certificate of Status	Certified Copy	Certifica
		(additional copy is enclosed)	Certified

\$60,00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address: Registration Section Division of Corporations P.O. Boy: 6327 Tallahassee, FL 32314. Street Address: 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
-	0
	DRGANIZATION FILED
· · ·	
i, ucid Investments & Property Management LLC	2021 FEB 28 PM 2: 09
(<u>Name of the Limited Liability Compa</u> (A Florida Limited	TALLAHASSEE, FL
The Articles of Organization for this Limited Liability Company	were filed on 2/3/2022 and assigned
Florida document number <u>L22000059575</u>	
This amendment is submitted to amend the following: A. If amending name, <u>enter the new name of the limited liah</u>	ility company here:
Mega Realty International Property Management LLC	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1423 SE 16th PI
(Principal office address MUST BE A STREET ADDRESS)	Unit 101
	Cape Coral, FL 33990
Enter new mailing address, if applicable:	1423 SE 16th PI
. ,.	Unit #101
(Mailing address MAY BE A POST OFFICE BOX)	Cape Coral, FL 33990
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B. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new registered</u> agent and/or the new registered office address here:

Name of New Registered Agent:	Maria Eugenia Gaviria	
New Registered Office Address:	1423 SE 16th Pl unit#101	
They want to the	Enter	·Florida street address
	Cape Coral	, Florida ³³⁹⁹⁰
7	Ciry	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.

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	If Changing Registered Agent Signature of New Registered Agent
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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
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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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 2.18 2022.
with
Signature of a member or authorized representative of a member
Calible Pina
Typed or printed name of signee

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