Florida Department of State Division of Corporations

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : SORSHER & ASSOCIATES, LLC.

Account Number : 120170000056 : (954)842-2931 Fax Number : (954)842-2936

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

M.T TRENDS LLC

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Corporate Filing Menu

Help

COVER LETTER

	Registration Sec Division of Corp			
eun iew	M.T TRENI			
SUBJEC	·	Name of Limi	ted Liability Company	···
The enclo	sed Articles of a	Amendment and fee(s) are sub	mitted for filing.	
Please ret	um all correspo	ndence concerning this matter	to the following:	
		MICHAL, MUSHAYEV		
			Name of Person	
	M.T TRENDS LLC			
	Firm/Company			
	200 LESLIE DR APT 1117			
	Address			
	HALLANDALE BEACH, FL 33009			
			City/State and Zip Code	
		MTTRENDS4U@GMAIL.	COM to be used for future annual report notification	n)
For furthe	er information o	oncerning this matter, please c		,
MICHAI	L, MUSHAYEV	r	754 249-6184	
	Name of	f Person		phone Number
Enclosed	is a check for th	ne following amount:		
≣ \$ 25.0	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Addres Registration S Division of C P.O. Box 632 Tallahassee, I	Section Porporations 7	Street Address: Registration Section Division of Corpora The Centre of Tallah 2415 N. Monroe Str Tallahassee, FL 323	tions nassee eet, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

M.T TRENDS LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) and assigned 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 "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (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: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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.

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

Title	<u>Name</u>	Address	Type of Action
CEO	MICHAL, MUSHAYEV	200 LESLIE DR APT 1117	□Add
		HALLANDALE BEACH, FL 33009	Remove
			©Change
AMBR	MICHAL, MUSHAYEV	200 LESLIE DR APT 1117	■Add
		HALLANDALE BEACH, FL 33009	□Remove
			□Change
			□Remove
			□Remove
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			□Change
			□ Add
			□Remove
			□Change

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E. Effective date, if other than	the date of filing:	(optional) g or more than 90 days after filing.) Pursuant to 605.0207 (3)(b
Note: If the date inserted in thi	must be specific and cannot be prior to date of filing is block does not meet the applicable statutory e Department of State's records.	g or more than 90 days after filing.) Pursuant to 605.0207 (3)(by filing requirements, this date will not be listed as the
f the record specifies a delayed effe ecord is filed.	ctive date, but not an effective time, at 12:01	a.m. on the earlier of: (b) The 90th day after the
Dated	2022	
	Signature of a member or authorized represen	stative of a member
MICHAL, MUSHA	YFV	
	Typed or printed name of sign	****

Filing Fee: \$25.00