5/27/22, 10:46 AM

Division of Corporations



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	To: Division of Corporations Fax Number : (850)617-6383		
27 Pri 12: 24	From: Account Name : PARASEC Account Number : I20180000086 Phone : (916)576-7000 Fax Number : (800)603-5868 **Enter the email address for this business annual report mailings. Enter only one Email Address:	e email address please.♥♥	
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To: 18506175383, From: 19166105073 Date: 05/27/22 Time: 3:49 PM Page: 03/05

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MAESLY 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 <u>04/25/2022</u> and assigned Florida document number <u>1.22000194327</u>.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

MAEVSLY LLC

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:	18922 NE Miami C1	
(Principal office address MUST BE A STREET ADDRESS)	Miami, FL 33179	
Truchar office and ckin og the contraint apprenting		22 77 7
Enter new mailing address, if applicable:	18922 NE Miami Ct	PH DVE
(Mailing address MAY BE A POST OFFICE BOX)	Miami, FL 33179	
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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:	IMMACULA P THIM	IOTHEE
New Registered Office Address:	18922 NE Miami Ct Enter	Florida street address
	Miami	. Florida 33179
	Cin	Zıp 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. Thereby confirm that the limited liability company has been notified in writing of this change.

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If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
AMBR	IMMACULA P THIMOTHEE	18922 NE Miami Ct	🗌 Add
		Miami, Fl. 33179	🗆 Remove
			NChange
			□ Add
			🗍 Remove
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			_ 🗆 Remove

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

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	5/20/2022	
	PM	
	And the second s	
	Signature of a member of authorized representative of a member	
	Immacula P Thimothee	
	Typed or printed name of signee	