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		istration Sec sion of Corp		
SUBJEC	~T.		ENTERPRISES LLC	•
SODIEC	., I i			ited Liability Company
The encl	osed	Articles of a	Amendment and fee(s) are sub	mitted for filing.
Please re	eturn	all correspor	ndence concerning this matter	to the following:
			JOSEPH MSEFYA	
			****	Name of Person
			-	Firm/Company
			1007 CHISHOLM ESTAT	TES DRIVE
			17 12 13	Address
			SAINT CLOUD, FL 3477	ī
				City/State and Zip Code
			MSEFYAJ@GMAIL.COM	to be used for future annual report notification)
For furth	ier in	formation ec	oncerning this matter, please ca	·
JOSEPH	IMS	SEFYA		757 450-8693
		Name of	Person	Area Code Daytime Telephone Number
Enclosed	l is a	check for th	e following amount:	
■ \$25.6	00 F	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee. Certified Copy (additional copy is enclosed) ☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
		ling Address sistration S		Street Address: Registration Section
	-		orporations	Division of Corporations
	P.O	. Box 6321	7	The Centre of Tallahassee
	Lali	lahassee, F	L 32314	2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

MSEFYA ENTERPRISES LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Plorida document number L22000225214	were filed on and assig	ned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the abbreviation "L.L.	
Enter new principal offices address, if applicable:	6900 TAVISTOCK LAKES BLVD	
Principal office address MUST BE A STREET ADDRESS)	SUITE 400	
	ORLANDO, FL 32827	
Enter new mailing address, if applicable:	6900 TAVISTOCK LAKES BLVD	
Mailing address MAY BE A POST OFFICE BOX)	SUITE 400	
	ORLANDO, FL 32827	
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, <u>enter the name of the new t</u>	<u>regist</u>
Name of New Registered Agent:		
New Registered Office Address:	Emer Florida street address	
	Florida	
	City 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.

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	ALEXANDER A. PONTILLO	7000 W PALMETTO PARK ROAD	≣ Add
		SUITE 210	□Remove
		BOCA RATON, FL 33433	
÷			□ Add
		·····	Remove
			□Change
			□Add
			□Remove
			□Change
			□ Add
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			□Change
			□Add
			□Remove
			□ Changa

Effective date, if other than the date of filing:
ne 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 ord is filed.
Dated 18 August
MSEFYA, JOSEPH

 $(\mathbf{c}_{i}, \ldots, \mathbf{c}_{i}, \mathbf{c}_{i}, \mathbf{c}_{i}, \cdots, \mathbf{c}_{i}, \mathbf{c}_{i})$

Filing Fee: \$25.00