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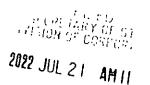
TO: Registration Section Division of Corporations			
SUBJECT: Marisleidis =	Fauerido	LLC	
·	Marisleidis Faverado LLC Name of Limited Liability Company  ed Articles of Amendment and fee(s) are submitted for filing.  rm all correspondence concerning this matter to the following:  Marislaidis Faverado Delgado Name of Person  Marislaidis Faverado LLC Firmicompany  15100 Stu 122 Ave Apt 1208  Address  Miami Florida 33186  City/State and Zip Code  Marislaidis 94 @ amail. com  E-mail address: (to be used for future annual report notification)  information concerning this matter, please call:  Said Figuratio Delgado at (201) 904-5991  Name of Person  Area Code Daytime Telephone Number		
The enclosed Articles of Amendment an	d fee(s) are submi	itted for filing.	
Please return all correspondence concern	ing this matter to	the following:	
Ma	rislaidis f	Faure Delgado Name of Person	
<u> </u>	arisluidis	Figures CLC	
15100	) <u>5w</u> 127	2 Ave Apt 1208 Address	
_ Mi	ami, Flo	ri La 3318 (e City/State and Zip Code	<del></del>
			ation)
For further information concerning this	natter, please call:	:	
Maristeriais Figuereco	Delgaza	at ( <u>201</u> ) <u>904-50</u> Area Code Daytime T	Celephone Number
Enclosed is a check for the following an	ount:		
		Certified Copy	Certificate of Status & Certified Copy
Mailing Address: Registration Section		Street Address: Registration Secti	on
Division of Corporations		Division of Corpo	
P.O. Box 6327		The Centre of Tal	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Marisleidis Figueredo 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 \_\_\_\_\_\_ and assigned Florida document number \_\_\_\_\_\_. This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Marisleidis Figueredo Delagado LLC

The new name must be distinguishable and contain the words "Innited 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 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 \_\_\_. Florida \_\_\_\_ City

## 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
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