

L22 000 3910420

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(Business Entity Name)

(Document Number)

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OCT 11 2022

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FILED

2022 OCT 10 AM 9:02

SECRETARY OF STATE  
FALL ARIZONA

2022 OCT 10 AM 11:20

2022 OCT 10 AM 11:20

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 010157 8384787

AUTHORIZATION :

COST LIMIT : \$25.00

ORDER DATE : October 10, 2022

ORDER TIME : 10:18 AM

ORDER NO. : 010157-005

CUSTOMER NO: 8384787

DOMESTIC AMENDMENT FILING

NAME: MSAN SOLUTIONS LLC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT  
       RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker -- EXT#

EXAMINER'S INITIALS: \_\_\_\_\_

# COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** MSAN SOLUTIONS LLC

\_\_\_\_\_  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

EDUARDO FERNANDEZ F.

\_\_\_\_\_  
Name of Person

FL INTERNATIONAL TAX ADVISORS, INC.

\_\_\_\_\_  
Firm/Company

21055 NE 37TH AVE UNIT 604

\_\_\_\_\_  
Address

AVENTURA, FL 33180

\_\_\_\_\_  
City/State and Zip Code

INCORPORATIONS@FLINVEST.CO

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

For further information concerning this matter, please call:

EDUARDO FERNANDEZ F.

786

7478723

at ( )

\_\_\_\_\_  
Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &  
Certificate of Status

☐ \$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐ \$60.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

**Mailing Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

**FILED**

2022 OCT 10 AM 9:02

MSAN SOLUTIONS LLC

(Name of the Limited Liability Company as it now appears on our records)  
(A Florida Limited Liability Company)

CLERK OF CIRCUIT COURT  
DADE COUNTY, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 09/07/2022 and assigned  
Florida document number L22000390420.

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 "L.L.C."

Enter new principal offices address, if applicable:

2875 NE 191ST STREET, SUITE 500 OFFICE 523

**(Principal office address MUST BE A STREET ADDRESS)**

AVENTURA, FL 33180

Enter new mailing address, if applicable:

2875 NE 191ST STREET, SUITE 500 OFFICE 523

**(Mailing address MAY BE A POST OFFICE BOX)**

AVENTURA, FL 33180

**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:

2875 NE 191ST STREET, SUITE 500 OFFICE 523

*Enter Florida street address*

AVENTURA

*City*

, Florida 33180

*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 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>	<u>Address</u>	<u>Type of Action</u>
MGR	MARIELA AMPUERO HUNTER	2875 NE 191ST STREET SUITE 500 OFFICE 523	<input checked="" type="checkbox"/> Add
		AVENTURA, FL 33180	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	JOSE ALONSO SILVA ARAYA	2875 NE 191ST STREET SUITE 500 OFFICE 523	<input checked="" type="checkbox"/> Add
		AVENTURA, FL 33180	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	ELISA A. SANCHEZ ALFARO	66 W FLAGLER ST SUITE 900	<input type="checkbox"/> Add
		MIAMI, FL 33130	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	VIRGINIA M. CRUZ CASTILLO	66 W FLAGLER ST SUITE 900	<input type="checkbox"/> Add
		MIAMI, FL 33130	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	MARCELO C. SANCHEZ ALFAF	2875 NE 191ST STREET, SUITE 500 OFFICE 523	<input type="checkbox"/> Add
		AVENTURA, FL 33180	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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 09/15, 2022

Marcelo Sanchez

Signature of a member or authorized representative of a member

MARCELO SANCHEZ

Typed or printed name of signee