(Requestor's Name)
(104,000,000)
(Address)
(Address)
···
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
·····
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Special Instructions to Filing Officer: J. HORNE DEC 12 2022
2. 12.100
DEC

Office Use Only



400396696984

新 9: 21

RECEIVED

 \mathcal{F}_{\bullet}

FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 · 155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

12/09/22

NAME:

STANDARD403 LLC

TYPE OF FILING: AMENDMENT

COST:

55.00

RETURN: CERTIFIED COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

TO: Registration Sec Division of Corp			
STANDAR			
SUBJECT:	Name of Limit	ed Liability Company	
The enclosed Articles of a	Amendment and fee(s) are subn	nitted for filing.	
Please return all correspo	ndence concerning this matter to	o the following:	
	CHRISTOPHER DISCHIN	0	
		Name of Person	
	DISCHINO & SCHAMY P	LLC	
		Firm/Company	
	4770 BISCAYNE BLVD, S	SUITE 600	
		Address	
	MIAMI, FLORIDA 33137		
		City/State and Zip Code	
	ADMIN@DSMIAMLCOM	o be used for future annual report notif	fication)
For further information c	oncerning this matter, please ca		
HEATHER LEIGH		786 581-2542	
Name o	f Person	Area Code Daytime	e Telephone Number
Enclosed is a check for the	ne 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)
<u>Mailing Addres</u> Registration S		<u>Street Address:</u> Registration Sec	ction
Division of C		Division of Cor	

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



 $\langle \cdot \rangle$

STANDARD 403 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 L		were filed on $\frac{11/28/2}{}$	022	and assigned
This amendment is submitted to amend the foll				
A. If amending name, enter the new name o	f the limited liab	oility company here:		
MT403, LLC				
The new name must be distinguishable and contain the	words "Limited Liab	ility Company," the design	ation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applic	cable:	N/A		
(Principal office address MUST BE A STREI	ET ADDRESS)			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or agent and/or the new registered office addre	registered office ess <u>here</u> :	address on our recor	ds, <u>enter the nam</u>	e of the new registered
Name of New Registered Agent:	N/A			
New Registered Office Address:		Enter Florida s	treet address	
		City	Florida	Zip Code
New Registered Agent's Signature, if changing	Registered Agent	<u>t:</u>		

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
			□Remove
			Change
			□Add
			□Remove
			□Change
			□ Add
			□Remove
			□Change
			🗆 Add
			□Remove
			□ Change
.			
			Remove
			[]Change
			□Remove
			□ Changa

	ation, enter change(s)	nere: (Attach additi	onal sheets, if necessary.)	
•		_		
•	·	-		
17				
_				
·				
<u></u>				
<u></u>				
			-	
	<u> </u>			
	,	. .		
				
•				
			<u> </u>	
Effective date if other than th	e date of filing:		(ontional)	
Effective date, if other than the (If an effective date is listed, the date me Note: If the date inserted in this bedocument's effective date on the I	block does not meet the ap	plicable statutory filir	ore than 90 days after filing.) Pog requirements, this date wi	irsuant to 605.0207 (. Il not be listed as tl
the record specifies a delayed effecti cord is filed.	ve date, but not an effecti	ve time, at 12:01 a.m.	on the earlier of: (b) The 9	0th day after the
December 7	2022			
	F Ricardo Piech			
	F Ricardo Piech (Dec 8, 2022 11 05 EST) Signature of a member or a			

Filing Fee: \$25.00