

L23 0000 25972

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

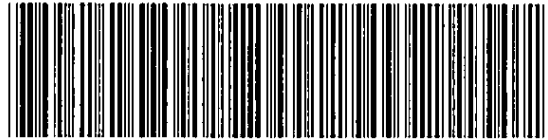
(Business Entity Name)

(Document Number)

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01/29/24--01011--011 \*\*25.00

2024 JAN 29 AM 9:05  
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## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** MIGUEL BENJAMIN LEONARDO CHRISTOPHER JACOB DANIEL MAVERICK NIKE  
\_\_\_\_\_  
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:

YEELY CHUNER JIANG

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

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

190 NW 151 AVE

\_\_\_\_\_  
Address

PEMBROKE PINES, FL 33028

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

TAXFL88@GMAIL.COM

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

For further information concerning this matter, please call:

YEELY CHUNER JIANG

954

805-9788

at (\_\_\_\_\_) \_\_\_\_\_

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

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

2017 JUN 29 AM 9:05  
RECEIVED  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FL 32303

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

MIGUEL BENJAMIN LEONARDO CHRISTOPHER JACOB DANIEL MAVERICK NIKHIL LOPEZ I

(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 01/12/2023 and assigned  
Florida document number 1.23000025972.

This amendment is submitted to amend the following:

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

N/A

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:**

(Principal office address MUST BE A STREET ADDRESS)

N/A

**Enter new mailing address, if applicable:**

(Mailing address MAY BE A POST OFFICE BOX)

N/A

**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:

N/A

*Enter 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 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          | SU, ZHI QUAN        | 190 NW 151 AVE           | <input type="checkbox"/> Add               |
|              |                     | PEMBROKE PINES, FL 33028 | <input checked="" type="checkbox"/> Remove |
|              |                     |                          | <input type="checkbox"/> Change            |
| MGR          | YEEKLY CHUNER JIANG | 190 NW 151 AVE           | <input checked="" type="checkbox"/> Add    |
|              |                     | PEMBROKE PINES, FL 33028 | <input type="checkbox"/> Remove            |
|              |                     |                          | <input type="checkbox"/> Change            |
|              |                     |                          | <input type="checkbox"/> Add               |
|              |                     |                          | <input type="checkbox"/> Remove            |
|              |                     |                          | <input type="checkbox"/> Change            |
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|              |                     |                          | <input type="checkbox"/> Add               |
|              |                     |                          | <input type="checkbox"/> Remove            |
|              |                     |                          | <input type="checkbox"/> Change            |

N/A

2016 JAN 29 AM 9:05  
SLOAN - J. D. H.

(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)

**Filing Fee: \$25.00**