

L230000043463

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

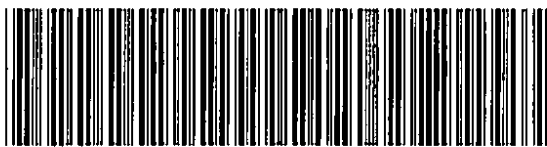
(Document Number)

Certified Copies _____

Certificates of Status _____

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Office Use Only



700410880257

FILED

2023 JUN 22 AM 8:32
CLERK OF STATE
TALLAHASSEE, FL



2023 JUN 22 PM 1:39
CLERK OF STATE
TALLAHASSEE, FL

Incorporating Services, Ltd.

1540 Glenway Drive
Tallahassee, FL 32301
850.656.7956
Fax: 850.656.7953
www.incserv.com

incserv

ORDER FORM

TO Florida Department of State
The Centre of Tallahassee
2415 North Monroe Street, Suite 810
Tallahassee, FL 32303
corphelp@dos.myflorida.com
850-245-6051

FROM Melissa Moreau

850.656.7953

REQUEST DATE 6/22/2023

PRIORITY Regular Approval

OUR REF.# (Order ID#) 1159771

ORDER ENTITY
MOS MIA II HOLDCO, LLC

PLEASE PERFORM THE FOLLOWING SERVICES:

MOS MIA II HOLDCO, LLC (FL)

File the attached correction document and provide a certified copy.

NOTES:

\$55.00 Authorized

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,



Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

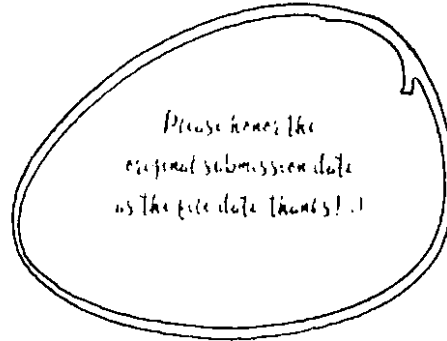


FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 23, 2023

INCSERV

SUBJECT: MOS MIA II HOLDCO, LLC
Ref. Number: L23000043463



We have received your document for MOS MIA II HOLDCO, LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The Managers address is not complete.

If you have any questions concerning the filing of your document, please call (850) 245-6000.

Neysa Culligan
Regulatory Specialist III

Letter Number: 723A00014252

*Please honor the
original submission date
as the file date (thanks)!.*

RECEIVED
2023 JUN 26 AM 9:40
TALLAHASSEE, FLORIDA

**STATEMENT OF CORRECTION
FOR
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

Pursuant to section 605.0209, F.S., this document is being submitted to correct a previously filed document.

FIRST: The name of the limited liability company is: MOS MIA II HoldCo, LLC

SECOND: The Florida Document number of the limited liability company is: L23000043463

THIRD: Document to be corrected is: Articles of Organization

(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)

- ☐ Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:

Article IV listed the incorrect Manager.

Article IV: The name and address of each person authorized to manage and control the LLC:

Title: MOS MIA I Blocker Inc., MGR, c/o Rodrigo Sadi, McLaughlin & Stern LLP, 260 Madison Ave., NY, NY 10016

OR

- ☐ Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

OR

- ☐ The electronic transmission of the record was defective.

Signature of Authorized Representative

Date

8/22/2023

Signature of new registered agent, if applicable : (NOTE: if correcting the registered agent, the new registered agent must sign accepting the designation).

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.

Registered Agent's Signature

Filing Fee: \$25.00
Certified Copy: \$30.00 (optional)