LZ3 000 055 398

| (Requestor's Name) |
|---|
| (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: |
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COVER LETTER

| TO: | Registration Sec Division of Corp | | | | | | |
|-----------|--------------------------------------|--|--|------------------|---------------|-------|--|
| oun tr | M.B.T. INVI | ESTMENT LLC | • | • | | | |
| SUBJE | UI: | Name of Limit | ed Liability Company | | | | |
| | | amendment and fee(s) are subnutered | | | | | |
| | | YULIET MARTIN TORRE | es | | | | |
| | | | Name of Person | <u> </u> | | | |
| | | - Juliet | Hartin Francis | | | | |
| | | 12425 SW 120TH AVE | | | | | |
| | | | Address | | | | |
| | | MIAMI FL 33186 | | | 202 | | |
| | | City/State and Zip Code yulietmt76@ymail.com | | | 2023 FED 16 | | |
| | | | o be used for future annual report notifi | cation) | 5 6 | | |
| For furtl | her information co | ncerning this matter, please ca | II: | | P. | 1 ± 1 | |
| YULIE | r martin tori | RES | 786 575-6783 | | 2: 3 FE | ₹., | |
| | Name of | Person | at () Area Code Daytime | Telephone Number | | | |
| Enclose | d is a check for the | e following amount: | | | | | |
| □ \$25 | .00 Filing Fee | ☐ \$30.00 Filing Fee & Certificate of Status | S55.00 Filing Fee & Certified Copy (additional copy is enclosed) | Certified (| e of Status & | | |
| | Mailing Address | <u>u</u> . | Street Address: | rtion | | | |

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

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| M.B.T. INVESTMENT L.L.C. | | |
|---|--|-----------------------------|
| (<u>Name of the Limited Liability</u> (A Florida | Company as it now appears on our records.) Limited Liability Company) | |
| The Articles of Organization for this Limited Liability Co | ompany were filed on 01/30/2023 | and assigned |
| Florida document number L23000055398 | <u>-</u> · | |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the limit | ed liability company here: | |
| | | 2023 |
| The new name must be distinguishable and contain the words "Limite | ed Liability Company," the designation "LLC" o | r the abbreviation "L.L.C." |
| Enter new principal offices address, if applicable: | | = 1 |
| (Principal office address MUST BE A STREET ADDRE | ESS) | -p 1: |
| | | |
| | | ω |
| Enter new mailing address, if applicable: | | [तो |
| (Mailing address MAY BE A POST OFFICE BOX) | | |
| | | |
| D. 16 19 19 19 19 19 | | |
| B. If amending the registered agent and/or registered eagent and/or the new registered office address here: | office address on our records, <u>enter the</u> | name of the new registere |
| | | |
| Name of New Registered Agent: | | |
| New Registered Office Address: | | |
| Negatired Office Address. | Enter Florida street address | |
| | Floric | la |
| | 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

| Title | <u>Name</u> | Address | Type of Action |
|-------|------------------------|------------------------------------|----------------|
| P | BERNUDEZ TRIANA MAYKEL | 124225 SW 120TH 4VE MIAMI FL 33186 | □Add |
| | | | □Remove |
| | | | ■ Change |
| VP | YULIET MARTIN TORRES | 124225 SW 120TH 4VE MIAMI FL 33186 | □Add |
| | | | □Remove |
| | | | Change |
| | | | 202 4 E |
| | | | Romove Change |
| | | | :37 |
| | | | □Remove |
| | | | □Change |
| | | | □Add |
| | | | □Remove |
| | | | Change |
| | | | |
| | | | Remove |
| | | | □Change |

| The first change is in the title of the position that says P change it | The first change is in the title of the position that says P change it to MGR and the second change is the title that | | | | | |
|--|---|--|--|--|--|---|
| says VP change it to MGR the third change is in the Member May | kel Bermudez Triana | | | | | |
| appears with the last name Bernudez and the correct one is Bernu | dez | | | | | |
| the Article should remain after the change in this way: Article V The name and address of person(s) authorized to manage LLC Title MGR Maykel Bermudez Triana 12525 SW 120TH AVE. MIAMI FL 33186 US | | | | | | |
| | | | | | title MGR Yuliet Martin Torres 12525 SW 120TH AVE. MIAMI | FL 33186 US |
| | | | | | A copy of the ID of the Member Maykel Bermudez Triana is attac | thed to verify his real name and last nam 🕞 |
| | 0/3 FI | | | | | |
| | | | | | | |
| | <u> </u> | | | | | |
| | PH 2: | | | | | |
| | <u> </u> | | | | | |
| | | | | | | |
| ffective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot be prior to date of ote: If the date inserted in this block does not meet the applicable state occument's effective date on the Department of State's records. | | | | | | |
| record specifies a delayed effective date, but not an effective time, at 12 is filed. | 2:01 a.m. on the earlier of: (b) The 90th day after | | | | | |
| FEBRUARY 08 2023 | | | | | | |
| Signature of a member or authorized repr | tim tames | | | | | |
| | | | | | | |
| YULIET MARTIN TORRES | | | | | | |

Filing Fee: \$25.00