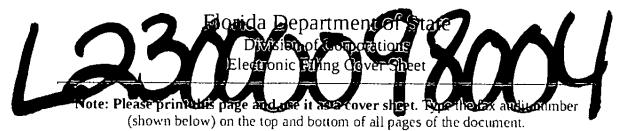
Division of Corporations



(((H23000252544 3)))



H230002525443ABC.

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

1.5
manyt.
i
C 127
Termines.
المالين

٠.	**Enger the email address for this business entity to be used for fut	re 203
Ë	ь யైడ్మైnual report mailings. Enter only one email address please.**	(_
÷		<u>.</u>
.a.	्र दृष्ट्रित्त्वil Address:	٠
<u>a</u> .	CT.	ري
တ	도 <u>무</u> 요방	77
=::	関連型 LLC AMND/RESTATE/CORRECT OR M/MG RESIGN []	
	MIOMAX LLC	5
[[5]		Œ

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

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

MIÓMAX LLC.	
(Name of the Limited Liability Compa (A Florida Limited	iny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company	were filed on 02/23/2023 and assigned
Florida document number L23000098004	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
The new name must be distinguishable and contain the words "Limited Liabi	lity 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)	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
	2
B. If amending the registered agent and/or registered office a	address on our regards, ontor the name of the new registeres
agent and/or the new registered office address here:	co
	70 C
Name of New Registered Agent:	
New Registered Office Address:	. 12
	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 agre- provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

7/19/2023 11:56;58 PDT To: 18506176383

Page: 3/4

From: Registered Agents Inc

Fax: 2083295246

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>	Name	<u>Address</u>	Type of Action
MGR	Kevin De La Cruz Ariate	7901 4TH ST N STE 300	
		ST. PETERSBURG, FL 33702	□Remove
		-	□Change
<u></u>			□Add
			Remove
			Change
			□Add
			□Remove
			Change
			□Remove
			☐ Change
			□Add
		 	DRemove
			□Change
			□Add
			□Remove
			□ Change

D. If amending any o	other information, enter change(s) here: (Attach additional sheets, if necessary.)
	
	
Note: If the date ins	sted, 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)(serted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the e date on the Department of State's records.
the record specifies a decord is filed.	delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b). The 90th day after the
Dated July 19	
	Signature of a member or authorized representative of a member
	Nat Smith Typed or printed name of signee