L23000127946

| (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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| | Registration Se Division of Cor | | • | | | | |
|-----------------|---|--|---|--|--|--|--|
| SUBJEC | | LUTIONS LLC | | | | | |
| SUBJEC | Name of Limited Liability Company | | | | | | |
| The enclo | osed Articles of | Amendment and fee(s) are sub | omitted for filing. | | | | |
| Please ret | urn all correspo | indence concerning this matter | to the following: | | | | |
| | | MARIA FERNANDA MO | DRENO | | | | |
| | | | Name of Person | . | | | |
| | | MFMG SOLUTIONS LLC | | | | | |
| | | | Firm/Company | | | | |
| | | 2920 DOVER LN | | | | | |
| | | Address | | | | | |
| | | LAKELAND, FL 33801 | | | | | |
| | | | City/State and Zip Code | | | | |
| | | E-mail address: (| to be used for future annual report notif | fication) | | | |
| For further | er information c | oncerning this matter, please c | all: | | | | |
| MARIA | MARIA FERNANDA MORENO 863 | | at () | | | | |
| | Name o | t Person | Area Code Daytime | e Telephone Number | | | |
| Enclosed | is a check for th | ne following amount: | | | | | |
| ■ \$25.0 | 0 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) | | | |
| Ī | Mailing Addres Registration 5 Division of C | Section | <u>Street Address:</u> Registration Sec Division of Cort | | | | |

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

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

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| MFMG SOLUTIONS LLC | | |
|--|--|-------------------------|
| (<u>Name of the Limited Liability Compa</u> (A Florida Limited | any as it now appears on our records.) Liability Company) | |
| The Articles of Organization for this Limited Liability Company | were filed on MARCH 13, 2023 | and assigned |
| Florida document number L23000127946 | | |
| his amendment is submitted to amend the following: | | |
| a. If amending name, enter the new name of the limited liab | oility company here: | |
| | | 20 |
| he new name must be distinguishable and contain the words "Limited Liabi | lity Company," the designation "LLC" or the | e abbreviation "L.L.C." |
| Enter new principal offices address, if applicable: | 2920 DOVER LN | 1 |
| Principal office address MUST BE A STREET ADDRESS) | LAKELAND, FL 33801 | 30 |
| | | |
| | | . . |
| Inter new mailing address, if applicable: | 2920 DOVER LN | 12 |
| Mailing address MAY BE A POST OFFICE BOX) | LAKELAND, FL 33801 | |
| | | |
| | | |
| 3. If amending the registered agent and/or registered office | address on our records, enter the n | ame of the new regist |
| gent and/or the new registered office address here: | | |
| | | |
| Name of New Registered Agent: | | |
| New Registered Office Address: | | |
| | 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> | Address | Type of Action |
|--------------|----------------|--------------------|----------------|
| AMBR | MARIA F MORENO | 2920 DOVER LN | |
| | | LAKELAND, FL 33801 | □Remove |
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| | ist be specific and cannot be prior to date of lock does not meet the applicable sta | (optional) If filing or more than 90 days after filing.) Pursuant to 605.1 tutory filing requirements, this date will not be liste |
| cord specifies a delayed effectives tiled. | ve date, but not an effective time, at 1 | 2:01 a.m. on the earlier of: (b) The 90th day after |
| ed | 2023 | |
| | Mary | presentative of a member |
| | arguature or a membery of authorized te | presentative of a memoer |

Filing Fee: \$25.00