L23000147821

(Requestor's Name)
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(City/State/Zip/Phone #)
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PICK-UP WAIT MAIL
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COVER LETTER

TO:

Registration Section

Tallahassee, FL 32314

DIVISION OF COL	porations				
	EALZ DELIVERY LLC (NA)	ME CHANGE }			
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	BRIAN BURKS				
	Name of Person				
	MRA GLOBAL LLC				
		Firm/Company	207		
6210 CASTLEWOOD LANE			2024FEB 20 PM 2: 13		
		Address	В 20 - 		
	ORLANDO, FLORIDA 33	2808			
		City/State and Zip Code	—		
	ANDRADESCORSOS@G		— ∰ - - - - - - - - - - - -		
		to be used for future annual report notification)	·		
For further information of	concerning this matter, please c	all:			
MELVIN R ANDRADE		689 2669619 at ()			
Name o	of Person	Area Code Daytime Telephone N	umber		
Enclosed is a check for t	he following amount:				
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy Cer (additional copy is enclosed) Cer	.00 Filing Fee, rtificate of Status & rtified Copy litional copy is enclosed)		
Mailing Addre Registration Division of C P.O. Box 63	Section Corporations	Street Address: Registration Section Division of Corporations The Centre of Tallahassee			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CHEAP DEALZ DELIVERY LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.) hability Company)	
The Articles of Organization for this Limited Liability Company Florida document number 1.23000147821	were filed on 03/23/23	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
MRA GLOBAL LLC		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or th	ne abbreviation "A.C."
Enter new principal offices address, if applicable:	200 E ROBINSON ST	
(Principal office address MUST BE A STREET ADDRESS)	SUITE 1120 - B70	B 2
	ORLANDO, FLORIDA 32801	3.8
Enter new mailing address, if applicable:	200 E ROBINSON ST	₩ 2:
(Mailing address MAY BE A POST OFFICE BOX)	SUITE 1120 - B70	, : ω
	ORLANDO, FLORIDA 32801	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	address on our records, enter the r	name of the new registered
	Florida	7:- C. I.
	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
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			□Remove
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amending any other information, en	mer enange(s) nei	e: {ziiiacn	additional sheets	, ij necessi	(13.)	
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Iffective date, if other than the date of an effective date is listed, the date must be spectrote: If the date inserted in this block doe locument's effective date on the Department.	cific and cannot be prices not meet the appli	cable statute	ling or more than 90 ory tiling requirem	(optiona days after fili ents. this da	ig.) Pursuan	to 605.02 be listed
record specifies a delayed effective date, t d is filed.	but not an effective	time, at 12:0	I a.m. on the earl	ier of: (b)	The 90th d	ay after th
ated MARCH 18	. 2024					
Brian Burks			Melvin.	Andra	de	
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	ire of a member or au	horized repre	sentative of a membe	er		

Filing Fee: \$25.00