

L23000 K6421

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

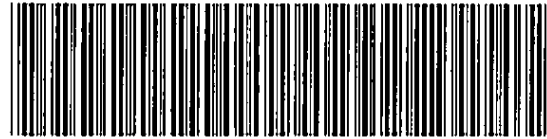
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

J. HORNE
APR 18 2023

Office Use Only



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RECEIVED
2023 APR 17 PM 3:34
ATTORNEY

2023 APR 17 AM 11:11
SECRETARY
TALLAHASSEE
D

FLORIDA CAPITAL COURIER SERVICES, INC

2330 CLARE DRIVE

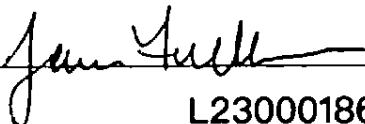
TALLAHASSEE, FL 32309

(850) 524-5437

(850) 524-6243

Please use funds from this account: I20210000160: \$ 30.00

Authorization Signature: _____:



MBF IMPORTS LLC

L23000186421

BUSINESS NAME

DOCUMENT #

___ Certified Copy of Articles of Organization

__X__ Certificate of Status

NEW FILINGS

- ___ Profit Corp
- ___ Not for Profit
- ___ Limited Liability
- ___ Domestication
- ___ Other
- ___ CORP
- ___ LLLP

AMMENDMENTS

X Amendment

- ___ Resignation of R.A. Officer/Director
- ___ Change of Registered Agent
- ___ Revocation of Dissolution
- ___ Merger
- ___ Conversion
- ___ Amended and restated Articles
- ___ Statement of Authority

OTHER FILINGS

- ___ Annual Report
- ___ Fictitious Name
- ___ APOSTILLE
- ___ Country

REGISTRATION/QUALIFICATIONS

- ___ Foreign filing
- ___ Limited Partnership
- ___ Reinstatement
- ___ Other

EXAMINER'S INITIALS: _____

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2330 CLARE DRIVE

TALLAHASSEE, FL 32309

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MBF IMPORTS LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fees(s) are submitted for filing.

Please return all correspondence concerning this matter to the following.

MICHAEL FEINBERG

Name of Person

MBF IMPORTS LLC

Firm Company

8460 SPERRY STREET

Address

ORLANDO, FL 32827

City, State and Zip Code

MEFEINBERG92@GMAIL.COM

E-mail address (to be used for future annual report notification)

For further information concerning this matter, please call

MICHAEL FEINBERG

321

223-5836

Area Code

Daytime Telephone Number

Name of Person

Enclosed is a check for the following amount

☐ \$25.00 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)

Mailing Address:

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

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**

FILED
2023 APR 17 AM 11:10
SECRETARY OF
TALLAHASSEE, FL

MBI IMPORTS LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on APRIL 14TH, 2023 and assigned
Florida document number 123000186421

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC"

Enter new principal offices address, if applicable:

8460 SPERRY STREET

(Principal office address MUST BE A STREET ADDRESS)

ORLANDO, FL 32827

Enter new mailing address, if applicable:

8460 SPERRY STREET

(Mailing address MAY BE A POST OFFICE BOX)

ORLANDO, FL 32827

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

City, State, Zip Code
Orlando, Florida 32827

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

MGR = Manager
AMBR = Authorized Member

AMBR = Authorized Member

[illegible]

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Please remove from Article II + III
the Apt. 405 from address area.

E. Effective date, if other than the date of filing: 04/17/2023 (optional)

(If an effective date is listed, 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)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed

Dated 04/17/2023



Signature of a member or authorized representative of a member

MICHAEL B. FEINBERG

Typed or printed name of signer

Filing Fee: \$25.00