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Special Instructions to	Filing Officer:	

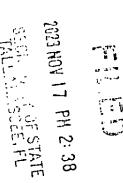
Office Use Only



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COVER LETTER

	sistration Sect ision of Corpo				
SUBJECT:	MSH VEND	OR LLC			
		Name of Lim	ited Liability Company		
		mendment and fee(s) are sub			
	un contașem	MAIKEL SANCHEZ			
			Name of Person		
		MAIKEL SANCHEZ			
			Firm/Company		
		3375 GRAND AVE			
			Address		
		MIAMI, FL, 33133			
			City/State and Zip Code		
		MSHVENDOR@GMAIL.			
		E-mail address: (to be used for future annual report noti	fication)	
For further in	nformation con	ncerning this matter, please of	all:		7073
MAIKEL S.	ANCHEZ		at (305) 8503986		
	Name of F	Person	Area Code Daytim	e Telephone Number	2023 HOW 1.7 P
Enclosed is a	a check for the	following amount:			PH 2: 3:
■ \$25.00 F	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	e of Status &
			C		

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

ed Liability Company as it now appea (A Florida Limited Liability Company)	rs on our records.)	
NI		
iability Company were filed on $rac{N^0}{2}$	OVEMBER 03, 2023	and assigned
owing:		
f the limited liability company h	ere:	
vords "Limited Liability Company," the o	designation "LLC" or the ab	breviation "L.L.C."
able:		
T ADDRESS)		
BOX)		
	ecords, enter the nam	e of the new register
MAIKEL SANCHEZ		
3375 GRAND AVE	<u> </u>	The Part of the Pa
Enter Flo	rida street address	C. C.
MIAMI	, Florida ³³	38 TEL 38
1	owing: f the limited liability company h vords "Limited Liability Company," the or cable: ET ADDRESS) BOX) registered office address on our ress here: MAIKEL SANCHEZ 3375 GRAND AVE	owing: f the limited liability company here: words "Limited Liability Company," the designation "LLC" or the ab rable: ET ADDRESS) registered office address on our records, enter the nam ss here: MAIKEL SANCHEZ

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
MGR	MAIKEL SANCHEZ	3375 GRAND AVE., MIAMI,FL,33133	≣Add
			□Remove
			□Change
		_	
			□Remove
			□Change
		_	□ Add
			□Remove
			C Gehange
			
			Remove
			□ Change
		_	
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