Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H24000146671 3)))



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 : TAX COUNSEL, PLLC Account Number : I20210000011 : (305)907-5540 Phone Fax Number : (305)907-5437

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:\_\_

andrea@taxcnsl.com

# LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MP VERO, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

Electronic Filing Menu Corporate Filing Menu

Help

APR 2 4 2024 T. LEMIEUX

(((H24000146671 3)))

# AMENDED AND RESTATED ARTICLES OF ORGANIZATION OF MP VERO, LLC

Pursuant to F.S. 605.0202 of the Florida Revised Limited Liability Company Act, the undersigned, being the Manager of MP VERO, LLC, a Florida Limited Liability Company (the "Company"), hereby adopts the following Amended and Restated Articles of Organization, which amend, restate, and supersede in their entirety the Articles of Organization of the Company that were filed with the Florida Department of State on February 27, 2024 and assigned Florida document number L24000098063.

#### ARTICLE I - NAME

The name of the limited liability company is MP VERO, LLC, ("Company").

## ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address: 525 N Ocean Blvd Apt 1614 Pompano Beach, FL 33062

Mailing Address: 999 Ponce de Leon Blvd., Ste 720 Coral Gables, FL 33134

ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE

The name and the Florida street address of the registered agent are:

Tax Counsel, PLLC 999 Ponce de Leon Blvd., Ste 720 Coral Gables, FL 33134

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating 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

Tax Counsel, PLLC

By Andrea Aguilar, Authorized Representative

(Z)

(((H24000146671 3)))

### ARTICLE IV - MANAGERS OR MEMBERS

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

Name and Address:

"MGR" = Manager

"AMBR" = Authorized Member

**MGR** 

Marion Valenzuela-Chadwick 525 N Ocean Blvd Apt 1614 Pompano Beach, FL 33062

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member

This document is executed in accordance with section 605.0203(1)(b), Florida Statutes. 1 am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Marion Valenzuela-Chadwick

Typed or printed name of signee