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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

Account Number : I20000000145 Phone : (305)444-4994 Fax Number : (305)328-4774

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

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MWT CONSULTING LLC

K. SALY AUG 15 2025

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| Certified Copy | 0 |
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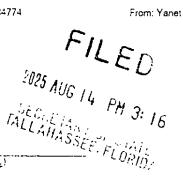
Electronic Filing Menu

Corporate Filing Menu

Help

To:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



MWT CONSULTING 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 Lie Florida document number L24000323930 | | were filed on <u>07/2</u> : | 3/2024 | and assigned |
|--|-----------------------|-----------------------------|-----------------------|----------------------|
| This amendment is submitted to amend the follo | wing: | | | |
| A. If amending name, enter the new name of | the limited light | lity company here: | | |
| The new name must be distinguishable and contain the we | ords "Limited Liabili | ty Company," the design | stion "LLC" or the al | obreviation "L.L.C." |
| Enter new principal offices address, if applica | ble: | | | |
| (Principal office address MUST BE A STREE) | (ADDRESS) | | | |
| Enter new mailing address, if applicable: | | 1010 BRICKELI | | 007 |
| (Mailing address MAY BE A POST OFFICE B | <u>:0X)</u> | MIAMI, FL 3313 | 31 | · |
| B. If amending the registered agent and/o registered agent and/or the new registered off. Name of New Registered Agent: | ice address here | ice address on our | records, enter | the name of the new |
| New Registered Office Address: 1010 | | KELL AVE UNIT | | |
| | | Enter Florida st | reet address | |
| | MIAMI | | Florida | 33131 |
| Non-Position of a control of the con | | Ciŋ | | Zip Code |
| New Rogistered Agent's Signature, if changing Re | gistered 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

From: Yanet Avila

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

| Title | Name | Address | Type of Action |
|----------|----------------------|---|--|
| AMBR | EROS W TIFFER | 1010 BRICKELL AVE UNIT 2007 | |
| | | MIAMI, FL 33131 | ☐ Remove |
| | | | M Change |
| AMBR | PABLO ALFONSO FLORES | 1010 BRICKELL AVE UNIT 2007 | |
| | | MIAMI, FL 33131 | □ Remove |
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| ffec | effective date, if other than the date of filing: | |
| ote: | effective date is fixed, the date must be specific and connot be prior to date of filing or more than 90 days after filing.) Parsuant to ear I the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be | : 605 0207 (3) listed as the |
| ocur | ument's effective date on the Department of State's records. | |
| ate | e of Adoption: | |
| e re The | record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the ea ne 90th day after the record is filed. | arlier of: |
| ated | ad AUGUST 14TH 2025 | |
| | to turned T. | |
| | wesley tiller tag 14, 2023 12.09.29 HD1) Signature of a membur or authorized representative of a member | |
| | | |