L24000333574

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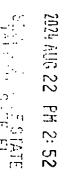
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COVER LETTER

	Registration S Division of Co		
SUBJEC		OUTH FLORIDA, LLC	
300000		Name of Lin	nited Liability Company
The enclo	osed Articles of	Amendment and fee(s) are sub	omitted for filing.
Please re	tum all correspo	ondence concerning this matter	to the following:
		Maribel B. Prieto	
			Name of Person
		MPS OF SOUTH FLORII	DA. LLC
			Firm/Company
		17990 SW 11TH COURT	
			Address
		Pembroke Pines, FL 3302	9
		 	City/State and Zip Code
		maribelbprieto@hotmail.co	
		E-mail address: (to be used for future annual report notification)
For further	er information o	concerning this matter, please c	all:
Maribel E	3. Prieto		954 770-7360 at ()
Name of Person		f Person	Area Code Daytime Telephone Number
Enclosed	is a check for th	ne following amount:	
□ \$25.0	0 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)
ŀ	Mailing Addres Registration S Division of C	Section	Street Address: Registration Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

The Centre of Tallahassee

2415 N. Monroe Street, Suite 8107

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MPS OF SOUTH FLORIDA, LLC

(<u>Name of the Limited Liability Comp</u> (A Florida Limited	nny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L24000333574	were filed on July 28, 2024	and assigned
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 "L.L.C." or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		
The new name must be distinguishable and contain the words "Limited Liab	lity Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent:	address on our records, <u>enter the</u>	name of the new registere
New Registered Office Address:	Enter Florida street address	<u> </u>
	, Florid	a
	Ciņ	Zip Code
New Registered Agent's Signature, if changing Registered Agent	<u>:</u>	
I hereby accept the appointment as registered agent and ago provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	e performance of my duties, and I provided for in Chapter 605, F.S.	am familiar with and Or, if this document is relimited liability PH
If Cha	nging Registered Agent, Signature of Ne	

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	Maribel B. Prieto	17990 SW 11TH COURT, Pembroke Pines, FL 33029	9 ■ Add
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