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(((H24000360346 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : EAST COAST MULTISERVICE INC

Account Number : I20230000142 Phone : (305)631-2190 Fax Number : (786)713-1965

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

mail	Address:				

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MICH LB LLC

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K. SALY

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. Page. 3 of 5

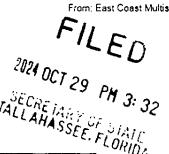
2024-10-29 17:35:22 GMT

17867131965

From: East Coast Multiservice Inc.

H24000360346 3

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



	173SEE 31.
MICH LB LLC	SSEE. FLORIDA
(Name of the Limited Liability Company as it now appears on our re (A Florida Limited Liability Company)	ccords.)
The Articles of Organization for this Limited Liability Company were filed on AUGUST 13	3. 2024 and assigned
Florida document number 1.24000354783	
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 "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)	
Unduling address MIXT BE A POST OF FICE BOXY	
B. If amending the registered agent and/or registered office address on our records, en agent and/or the new registered office address here:	nter the name of the new register
agent and/or the new registered office address here:	
Name of New Registered Agent:	
New Registered Office Address:	
Enter Florida street a	ddress
	, Florida
City	Zip Code
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

2024-10-29 17:35:22 GMT

H24000360346 3

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>	Name	Address	Type of Action
MGR	LOAIZA BALLESTEROS, MICHEL DAYANA	1470 NE 123RD ST	
		APT 1415	■Remove
		MIAMI FL 33161	□Change
MGR	TRIANA RAMIREZ, JUAN CAMILO	1470 NE 123RD ST	≘ .Add
		APT 1415	□Remove
		MIAMI FL 33161	70
			□ Remove
			THE 29 PH 3: 3: 3: 3: 3: 3: 3: 3: 3: 3: 3: 3: 3:
			☐ Change
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			□Change
			🗖 Add
			□Remove
			Change

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Effective date, if other than the offer effective date is listed, the date must Note: If the date inserted in this blo document's effective date on the De	se specific and cannot be prior to date ask does not meet the applicable s	of bing or more than 90 days after	filing.) Pursuant to 605,0207 (3)(
the record specifies a delayed effective ford is filed	date, but not an effective time, at	12:01 a m on the earlier of: (h) The 90th day after the
Dated OCTOBER 24TH	2024		
	··		

JUAN CAMILO TRIANA RAMIREZ Typed or printed name of signee