

Division of Corporations

LA9000396507

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : REX LEGAL LLC
Account Number : I20210000159
Phone : (786)491-4307
Fax Number : (786)373-3250

**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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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

STATE DEPARTMENT OF STATE
CORPORATIONS SECTION

2024 OCT 18 PM 1:30

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
MATE NEGRO LLC

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T. LEMIEUX

Electronic Filing Menu

Corporate Filing Menu

Help OCT 21 2024

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MATE NEGRO 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 Liability Company were filed on 09/11/2024 and assigned Florida document number L24000396507.

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)

66 W FLAGLER ST. SUITE 900

MIAMI, FL 33130

USA

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

66 W FLAGLER ST. SUITE 900

MIAMI, FL 33130

USA

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TALLAHASSEE, FL

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: _____

New Registered Office Address: _____

Enter Florida street address

_____, **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

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>	<u>Address</u>	<u>Type of Action</u>
MGR	LUIS F RIVAS	3096 AVALON ST.	<input type="checkbox"/> Add
		RIVERSIDE, CA 92509	<input checked="" type="checkbox"/> Remove
		USA	<input type="checkbox"/> Change
MGR	Mijaíl Jose Aguilar Rodriguez	66 W FLAGLER ST. SUITE 900	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33130	<input type="checkbox"/> Remove
		USA	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

