

M07000003232

(Requestor's Name)

(Address)

(Address)

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(Business Entity Name)

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14 NOV - 6 PM 4:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DEPARTMENT OF STATE

11/07/2014 11:07 AM

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

From: SPVEF-SKID, LLC To: MMYC, LLC

Signature _____

Requested by: SETH

Name _____ Date _____ Time _____

Walk-In _____ Will Pick Up _____

____ Art of Inc. File _____
____ LTD Partnership File _____
✓ ____ Foreign Corp. File _____
✓ ____ L.C. File _____
____ Fictitious Name File _____
____ Trade/Service Mark _____
____ Merger File _____
✓ ____ Art. of Amend. File _____
____ RA Resignation _____
____ Dissolution / Withdrawal _____
____ Annual Report / Reinstatement _____
____ Cert. Copy _____
____ Photo Copy _____
____ Certificate of Good Standing _____
____ Certificate of Status _____
____ Certificate of Fictitious Name _____
____ Corp Record Search _____
____ Officer Search _____
____ Fictitious Search _____
____ Fictitious Owner Search _____
____ Vehicle Search _____
____ Driving Record _____
____ UCC 1 or 3 File _____
____ UCC 11 Search _____
____ UCC 11 Retrieval _____
____ Courier _____

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE
AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT
BUSINESS IN FLORIDA**

SECTION I (1-3 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of State: SPVEF-SKID, LLC

2. Jurisdiction of its organization: DELAWARE

3. Date authorized to do business in Florida: 05/31/2007

SECTION II (4-7 complete only the applicable changes)

4. New name of the limited liability company: MMYC, LLC

(must contain "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")

5. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

6. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:

7. Attached is an original certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

Signature of the authorized representative

STEVE ISRAEL

Typed or printed name of signee

Filing Fee: \$25.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

14 NOV -6 PM 4:25

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Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "SPVEF-SKID, LLC", CHANGING ITS NAME FROM "SPVEF-SKID, LLC" TO "MMYC, LLC", FILED IN THIS OFFICE ON THE FIFTH DAY OF NOVEMBER, A.D. 2014, AT 8:50 O'CLOCK A.M.

FILED
14 NOV -6 PM 4:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



4311705 8100

141370409

You may verify this certificate online
at corp.delaware.gov/authver.shtml


Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 1840763

DATE: 11-06-14

State of Delaware
Secretary of State
Division of Corporations
Delivered 08:55 AM 11/05/2014
FILED 08:50 AM 11/05/2014
SRV 141370409 - 4311705 FILE

STATE OF DELAWARE
CERTIFICATE OF AMENDMENT

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14 NOV -6 PM 4:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Name of Limited Liability Company: SPVEP-SKID, LLC
2. The Certificate of Formation of the limited liability company is hereby amended as follows:

The company is hereby changing its name to MMYC, LLC

IN WITNESS WHEREOF, the undersigned have executed this Certificate on
the 31 day of October, A.D. 2014

By: 
Authorized Person(s)

Name: Steve Israel
Print or Type