

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**M220000381098**

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To:

Division of Corporations  
Fax Number : (850) 617-6393

From:

Account Name : Vcorp SERVICES, LLC  
Account Number : 120080000067  
Phone : (845) 425-0077  
Fax Number : (845) 818-3588

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

Email Address: \_\_\_\_\_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
MGOTEAM, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

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2022 NOV -8 PM 3:21

APPROVED  
AND  
FILED

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MGOTEAM, 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 08/01/2022 and assigned  
Florida document number M22000013700.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

MGOTEAM LLC

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:**

1515 SE 17th Street, Suite 121/#460596

(Principal office address MUST BE A STREET ADDRESS)

Fort Lauderdale, Florida 33346

**Enter new mailing address, if applicable:**

1515 SE 17th Street, Suite 121/#460596

(Mailing address MAY BE A POST OFFICE BOX)

Fort Lauderdale, Florida 33346

**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**

APPROVED  
 AND  
 FILED  
 2022 NOV - 8 PM 3:21  
 CLERK OF DISTRICT COURT  
 1ST DISTRICT  
 FORT LAUDERDALE, FL



**D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)**

[illegible]

**E. Effective date, if other than the date of filing:** \_\_\_\_\_ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated November 2

~~Signature of a member or authorized representative of a member~~

Maximiliano Ojeda

Typed or printed name of signee

**Filing Fee: \$25.00**