M2100005248

(Requestor's Name)
(Address)
(Address)
(Address)
(,
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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Office Use Only



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2022 FEB 22 NH 10: 57

MICINIL

FEB 2 5 2002 I ALBRITTON



February 23, 2022

SUNSHINE STATE

CORRECTED
Please Allow For
Same File Date

SUBJECT: MAXHOME OF LOUISIANA, L.L.C.

Ref. Number: M21000005248

This will acknowledge receipt of your correspondence which is being returned for the following reason(s):

A certificate or a document of similar import evidencing the amendment must be submitted with the application. The certificate should be authenticated as of a date not more than 90 days prior to delivery of the application to the Department of State by the Secretary of State or other official having custody of the records in the jurisdiction under the laws of which it is incorporated, formed, or organized. A translation of the certificate, under oath or affirmation of the translator, must be attached to a certificate which is not in English.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist III

2022 FEB 24 PM 3: 39

Letter Number: 622A00004423

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Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 02/22/2022	_	⇔WALK IN≈
ENTITY NAME MH DY	NAMIC LLC	WALK IIV
DOCUMENT NUMBER_		
	PLEASE FILE THE ATTACHED AND RETURN	
xxxxx	Plain Copy	
	Certified Copy	
	Certificate of Status	
**	PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY**	
	Certified Copy of Arts & Amendments	
	Certificate of Good Standing	
	APOSTILLE' / NOTARIAL CERTIFICATION	
COUNTRY OF DESTINA	TION	
NUMBER OF CERTIFICA	TES REQUESTED	
TOTAL OWED \$25	ACCOUNT #: 120160000	072
	E 8 FM	

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

SECTION I (1-4 must be completed)

Name of limited liability Company as it appears		
State: MAXHOME, L.L.C.; cross reference name	MAXHOME OF LOUISIANA	- 10 P
Enter new principal office address, if applicable:		- FB 22 F
(Principal office address		
MUST BE A STREET ADDRESS)		SEE SEE
		महि ज
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
	•	
2. The Florida document number of this limited liab	oility company is: M21000003	5248
	,	
3. Jurisdiction of its organization: Louisiana		
4. Date authorized to do business in Florida: 05/03.		
4. Date authorized to do business in Fiorida.		-
SECTION 11 (5-9 complete only the applicable of	•	
5. New name of the limited liability company: MI	1 Dynamic LLC	
(must	contain "Limited Liability Co	ompany, ""L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted copy of the written consent of the managers or manmust contain "Limited Liability Company," "L.L.C	aging members adopting the	business in Florida and attach a alternate name. The alternate name
6. If amending the registered agent and/or registered registered agent and/or the new registered office ado		ds, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
The registered office reduces.	Enter Flori	la Street Address
		Florida
	City	, Florida Zip Code

New Registered Agent's Signature, if changing Registered Agent:

Thereby 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

Fitle/ Capacity	Name	Address	Type of Action
			__Add
	_		□Remo
			□Add
	_		□Reme
		<u></u>	□Add
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			Add
	_		□Remo
			_\\\dd
aforementioned am	icate, if required: no more than 90 days endment(s), duly authenticated by the che law of which this enfire the same of the authenticated by the control of the authenticated by the same of the same	official having custody of records	□Remo in the

Filing Fee: \$25.00

R. Kyle Ardoin SECRETARY OF STATE

01/04/2022

State of Louisiana Secretary of State



COMMERCIAL DIVISION 225.925.4704

Administrative Services

225.932.5317 Fax

Corporations

225.932.5314 Fax

Uniform Commercial Code

225.932.5318 Fax

ONLINE FILING cbriley@bakerdonelson.com

MH DYNAMIC LLC

It has been a pleasure to approve and place on file your name change. The appropriate evidence is attached for your files.

Payment of the filing fee is acknowledged by this letter.

In addition to email and text notifications, business owners now have the option to enroll in our secured business filings (SBF) service. This service is available online, at no charge, by filing a notarized affidavit. Upon enrollment, an amendment cannot be made to your entity without approval using your personal identification number. This is another way to protect your business from fraud and identity theft.

Please note that as of January 1, 2018, business owners in the following parishes will be required to file all available business documents online through geauxBIZ: Ascension, Bossier, Caddo, Calcasieu, East Baton Rouge, Jefferson, Lafayette, Livingston, Orleans, Ouachita, Rapides, St. Tammany, Tangipahoa and Terrebonne.

Online filing options are available if changes are necessary to your registration or if you need to file an annual report. Please visit our website at **GeauxBiz.com** for your future business needs

Sincerely,

The Commercial Division WEB

R. Kyle Ardoin SECRETARY OF STATE

State of Louisiana Secretary of State



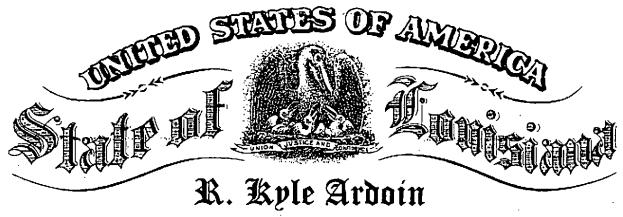
COMMERCIAL DIVISION 225.925.4704

Administrative Services
225.932.5317 Fax
Corporations
225.932.5314 Fax
Uniform Commercial Code
225.932.5318 Fax

January 4, 2022

The attached document of MH DYNAMIC LLC was received and filed on January 03, 2022.

WEB 36745715K



SECRETARY OF STATE

As Secretary of State, of the State of Louisiana, I do hereby Certify that

the attached document(s) of

MH DYNAMIC LLC

are true and correct and are filed in the Louisiana Secretary of State's Office.

44737568

' NMCHG

01/03/2022

page (s)

In testimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Baton Rouge on,

February 23, 2022

R 1 Fe 182.
Secretary of State



Certificate ID: 11531275#9EG62

To validate this certificate, visit the following web site, go to Business Services, Search for Louisiana Business Filings, Validate a Certificate, then follow the instructions displayed.

www.sos.la.gov

STATE OF LOUISIANA

. . . .

NAME CHANGE AMENDMENT

R.S. 12:1309

Old Name:

MAXHOME, L.L.C.

New Name:

MH DYNAMIC LLC

Date Amendment Adopted:

12/20/2021

Manner of Adoption:

UNANIMOUSLY APPROVED BY MEMBERS

The filing of a false public record, with the knowledge of its falsity, is a crime, subjecting the filer to fine or imprisonment or both under R.S. 14:133.

BY TYPING MY NAME BELOW, I HEREBY CERTIFY THAT I AM A MEMBER/MANAGER.

ELECTRONIC SIGNATURE: LAWRENCE CLOSS (1/3/2022)

TITLE: MEMBER