## L20000137697

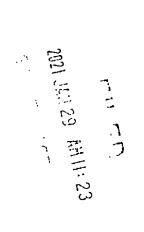
(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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2/13/21

### 1 COVER LETTER

Division of Co	rporations		
SUBJECT:	acs Ecites.	er vices	.4*·
	svaine of Lift	шей главину Сотрану	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspond	ondence concerning this matter	to the following:	
•	Č	Ų	
	Jarrid	Marce or ere	
	•	Name of Person	
	macs	ELite Services Firm/Company	
		Firm/Company	
	10103 Lan	y Creek ct	
	•	Address	
	Tampa,	FL. 33615	
	,	City/State and Zip Code	
	I macc E-mail address: (	FL. 33615 City/State and Zip Code 324 Q yahiro icon (to be used for future annual report notice)	√
For further information c	concerning this matter, please c	all:	
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	.0	4.4	
Jarriel V	Maccarone	at ( <u>813)</u> 770 Area Code Daytim	a Talunhana Number
rame (	T CISOTI	Area Code Daynin	e receptione (vuitoe)
Enclosed is a check for the	he following amount:		
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

TO:

Registration Section

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

# TO ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Mac's Elite	Socies 110	
(Name of the Limited Liability Company as it (A Florida Limited Liability	t now appears on our records.) y Company)	
The Articles of Organization for this Limited Liability Company were	filed on $\frac{9/10/2020}{}$ and assigned	
Florida document number <u>L2000 137697</u> .		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability co	ompany here:	
The new name must be distinguishable and contain the words "Limited Liability Cor	mpany," 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)		_
B. If amending the registered agent and/or registered office address agent and/or the new registered office address here:  Name of New Registered Agent:	ss on our records, <u>enter the name of the new reg</u> iste	- ered
		_
New Registered Office Address:	Enter Florida street address	-
	, Florida Zip Code	
	ity Zip Code ***	-
New Registered Agent's Signature, if changing Registered Agent:	<u> </u>	
I hereby accept the appointment as registered agent and agree to a		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>	Address	Type of Action
AmBe	Patricia Maccarono	10103 Luzy Cret ct.	□Add
		Tanpa, FL. 33615	Gremove
AMER	James Maccarone	10103 lazy Creek ct.	□Add
		Tanpa, Fl. 33615	Dikemove
			□Change
AMBR	Jeck Maccarone	10103 Lazy Creek ct.	□Add
		Tanpa, FL. 33615	CRemove
		<del> </del>	Change
Ambr	Geneva Maccarone	10103 Luzy Creek Ct.	□Add
		Tanpa, FL. 33615	EKemove
		-	□Change
Ambr	Cianna Santiago	4311 Bryside Village Dr.	□Add
		Tampa, Fl. 33615	ERemove
			□Change
<del></del>	<del></del>		□Add
			Remove
			□ Character

E. Effective date, if other than the date of filing:
E. Effective date, if other than the date of filing:  (User offstive 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)(1)  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the
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(Can offertive date is 4 is 4 is ted, 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
(Can offertive date is 4 is 4 is ted, 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
(Can offertive date is 4 is 4 is ted, 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
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(Map of Festive date is 4 is ted, 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
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 1 25 2021
Signature of a member or authorized representative of a member
Typed or printed name of signee