

L21000158 888

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

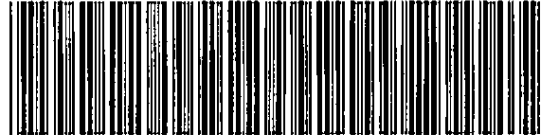
(Business Entity Name)

(Document Number)

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2022 NOV -8 PM 4:00
SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: *Registration Section
Division of Corporations

SUBJECT: MARMARSAN LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

HUMBERTO MACCIO

Name of Person

MARMARSAN LLC

Firm/Company

1155 Brickell Bay AV - apt 708

Address

Miami / Florida / 33131

City/State and Zip Code

maccio,humberto@gmail.com

E-mail address: (to be used for future annual report notification)

2022 NOV -8 PM 4:00
SECRETARY OF STATE
TALLAHASSEE, FL

For further information concerning this matter, please call:

HUMBERTO MACCIO

954 724-4141

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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)

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

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

MacMarson 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 04-06-2021 and assigned
Florida document number L21000158888

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)

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

Name of New Registered Agent:

HUMBERTO MACCIO

New Registered Office Address:

1155 Brickell Bay Ave - apt 708

Enter Florida street address

Miami

Florida 33131

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	ENRIQUE PORTNOY	2222 QUAIL ROOST DR - WESTON - FLORIDA	<input type="checkbox"/> Add
		33327	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	HUMBERTO MACCIO	1155 Brickell Bay Ave - apt 708 - Miami - Florida	<input checked="" type="checkbox"/> Add
		33131	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

2022 NOV - 8 PM 3:00
SECURITY
TALLAHASSEE
STATE

