L22 000 338 818

(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nar	me)
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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2023 JAH - 9 AM 9: 10



December 6, 2022

MATTHEW A MAGGIO 201 ANGLER AVE PALM BEACH, FL 33480 US

SUBJECT: MAGGIOS TAKE FLORIDA LLC

Ref. Number: L22000338818

SSEE, 71

We have received your document for MAGGIOS TAKE FLORIDA LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

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

Michael A Hall OPS Clerk

Letter Number: 022A00026955



COVER LETTER

TO: Registration So Division of Con			
SUBJECT: M	aggios Take Flo	orida LLC	····
	Name of Little	nted training Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	2
		<u>.</u>	
Please feturi aii coriespe	ondence concerning this matter	to the following.	
	Matthe	ew A. Maggio	2023 JAM - 9 AM 9: 1
		Name of Person O O	File of
	Magg	ios Take Florida Firm/Company	uc 5
	201	Angler Ave	
		V Address	
	Palm	Beach FL 3348 City/State and Zip Code	30
	<u>Matthewa</u> E-mail address: (maggio e aol com to be usaffor future annual report notif	ication)
For further information of	concerning this matter, please co	all:	
Matthew Ma	14410 1440n	at (<u>917</u>) <u>749</u> Area Code Daytime	- 9721 Telephone Number
Enclosed is a check for ti	he following amount:		
\$25,00 Filing Fee	□ \$30.00 Filing Fee &	□ \$55,00 Filing Fee &	□ \$60.00 Filing Fcc.
	Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres		Street Address:	
Registration (Registration Sec	
Division of C P.O. Box 632		Division of Corp The Centre of T	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Maggios la	ke florida L	LC		
Maggios al (Name of the Limited Liabil (A Florid	a Limited Liability Company	()		
The Articles of Organization for this Limited Liability (Florida document number	Company were filed on		and assigned	
This amendment is submitted to amend the following: A. If amending name, enter the new name of the lim	nited liability company	<u>here</u> :	2023 JAN	ن لو عد
The new name must be distinguishable and contain the words "Lin	nited Liability Company," the	e designation "LLC" or th	1.00	<u> </u>
Enter new principal offices address, if applicable:			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
(Principal office address MUST BE A STREET ADDI	<u>RESS)</u>		- <u> </u>	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or registere agent and/or the new registered office address here:	d office address on our	records, <u>enter the n</u>	ame of the new reg	stered
Name of New Registered Agent:	- 1- M. III 1 1 1 1 1 1 1			
New Registered Office Address:				
	Enter F	lorida strvet address	e: signation "LLC" or the abbreviation A.L.C. or the abbr	
	Cin:	, Florida		
	C tiv		гір Соав	

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 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>	Type of Action
AMBR Matthew A. Maggio 201 Angler Ave	X }Add
AMBR Matthew A. Maggio 201 Angler Ave Palm Beach, FC 33480) □Remove
	□Change
	Add The move of the manage of
	□ Remove
	Change
	□Remove
	□Change
	□ Add
	⊡ Кетюуе
	□Change
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Note: If the dat	if other than the is listed, the date must be inserted in this because date on the I	olock does not m	cet the applica	o date of filing or ole statutory fil	more than 90 days ing requirements	optional) safter filing.) P s, this date wi	ursuant to 60 ill not be li	05.0207 (sted as t
d is filed.	s a delayed effecti							ter the
Dated	12/24/2 . 2/12 Michae	. ک		_ ·				
	. Mi	Signature of a r) (c	izyd representati	ve of a member			
Ϋ́	Michae	1 Maggi	n					