

L01000003039

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

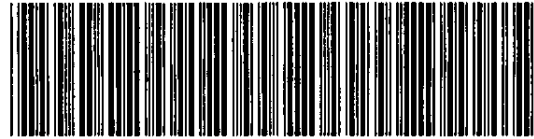
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18 MAY - 1 PM 3:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY

MAY - 7 2018

LAW OFFICES
BLACKBURN & COMPANY, L.C.

5150 BELFORT ROAD, SOUTH
BUILDING 500
JACKSONVILLE, FLORIDA 32256

DENNIS L. BLACKBURN

TELEPHONE: 904-296-7713
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FACSIMILE: 904-493-0384
EMAIL: dlb@blackburnco.com

April 20, 2018

Florida Department of State
Division of Corporations
Post Office Box 6327
Tallahassee, Florida 32314

Re: Reinstatement and Articles of Amendment
M&G Properties, LLC (Doc. #L01000003039)

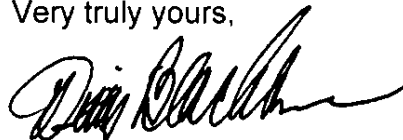
Dear Sir or Madam:

Enclosed is the Reinstatement Form and Articles of Amendment for the above named limited liability company. We attempted to reinstate the entity using the online filing services on Sunbiz but since the entity has been dissolved for more than twelve months and another entity is using the same name, our reinstatement filing was rejected. Here is the Reinstatement Tracking Number in case you need it: CR3900883086.

Also enclosed is my client's check in the amount of \$957.50 which includes \$932.50 for the reinstatement and \$25 for the amendment to the articles of organization. The Articles of Amendment change the name of the entity and also change the entity's mailing and principal address and changes the Registered Agent and Registered Address of the entity.

If you have any questions regarding these filings, please call us.

Very truly yours,



Dennis L. Blackburn

Enclosures

DLB:jh

c: Mr. Gregory E. Bolton (w/enclosures via email)

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

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TALLAHASSEE, FLORIDA

M&G PROPERTIES, 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 _____ and assigned
Florida document number L01000003039.

This amendment is submitted to amend the following:

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

M&G PROPERTIES I, 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:

538 COASTAL OAK LANE

(Principal office address MUST BE A STREET ADDRESS)

ATLANTIC BEACH, FL 32233

Enter new mailing address, if applicable:

538 COASTAL OAK LANE

(Mailing address MAY BE A POST OFFICE BOX)

ATLANTIC BEACH, FL 32233

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:

BLACKBURN & COMPANY, LC

New Registered Office Address:

5150 BELFORT RD. SO. BLDG. 500

Enter Florida street address

JACKSONVILLE

City

Florida 32256

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	GREGORY E. BOLTON	538 COASTAL OAK LANE	<input type="checkbox"/> Add
		ATLANTIC BEACH, FL 32233	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

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

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TALLAHASSEE, FLORIDA

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 APRIL 18, 2018

Gregory E. Bolton
Signature of a member or authorized representative

Signature of a member or authorized representative of a member

GREGORY E. BOLTON, MANAGER

Typed or printed name of signee