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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. BRYAN

AUG 25 2009

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MAG Reinsurance Consultants, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Miguel A. Gonzalez
Name of Person

MAG Reinsurance Consultants, LLC
Firm/Company

1395 Brickell Ave. Suite 1000
Address

Miami, FL 33131
City/State and Zip Code

ximena.saeenz@magreconsultants.com
E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Ximena Saeenz at (305) 377-4238
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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

MAG Reinsurance Consultants, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

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The Articles of Organization for this Limited Liability Company were filed on March 21, 2002 and assigned Florida document number L02000006690.

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 end with 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:

New Registered Office Address:

Enter Florida street address

, Florida

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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

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

amending the purpose
(please see attached document

Dated August 15th, 2009.

 Signature of a member or authorized representative of a member
Miguel A. Gonzalez
 Typed or printed name of signee

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 TALLAHASSEE, FLORIDA

CERTIFICATE OF AMENDMENT OF
ARTICLES OF ORGANIZATION
MAG REINSURANCE CONSULTANTS, LLC.

MAG Reinsurance Consultants LLC, a limited liability company organized and governed by the laws of the State of Florida (the "*Company*"), hereby executes and adopts the following Certificate of Amendment of the Articles of Organization of the Company and certifies as follows:

Article I NAME

The name of this Florida Limited Liability Company is MAG Reinsurance Consultants, LLC.

Article II DATE OF ARTICLES OF ORGANIZATION

The Company's Articles of Organization were filed on March 21, 2002 and then they were amended on January 31st, 2005.

Article III AMENDMENT

The Articles of Organization of the Limited Liability Company are amended so that the purpose of the Limited Liability Company is changed to:

- (a) To qualify as a insurance and reinsurance broker, to conduct any insurance and/or reinsurance business and to engage in such other lawful activities as are incidental, necessary or appropriate to the foregoing; and
- (b) Engage in any lawful act, business, or activity as may be necessary or desirable to effectuate the foregoing, or which is necessary, desirable, or incidental to the management of the Company.

Article IV DATE AMENDMENT ADOPTED

The amendment set forth in these Articles of Organization was adopted on the date shown below.

The undersigned executed this document on the date shown below.

MAG Reinsurance Consultants, LLC.

By: 

Name: Miguel Angel Gonzalez Arrate

Title: Managing Director

Date: August 19th, 2009

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