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PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Name)	· · · · · · · · · · · · · · · · · · ·
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Certified Copies	_ Certificates of	Status
Special Instructions to	Filing Officer:	
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TAIL AHASSEE, FLORID

M

C. LEWIS

OCT 2 3 2008

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations						
SUBJECT:	MACKAY	Hospitality Company)	1, LLC			
	inter to singer).	and risount (Alabany)	·			
The enclosed Articles of Amendment and fee(s) are submitted for filling.						
Please return all correspon	idence concerning this matter	to the following:				
	Jos	Name of Person)) · A ~			
	Mackay Hospitality, LLC					
5621 Brooklyn Aue						
	(Address)					
	SARASOTA, FI 34231					
		(City/State and Zip Code)				
For further information concerning this matter, please call:						
Joseph	Mackay		3-7778			
(Name of Person) (Area Code & Daytime Telephone Number)						
Enclosed is a check for the following amount:						
\$25.00 Filing Fee	Certificate of Status	©\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy			

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

(additional copy is enclosed)

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

FILED

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U		English on a	
MACKAY H	ospitality	TALCRETA SEE. FLORIDA	
(Name of the Limited Liability Compar (A Florida Limited Li	y as it now appears on our r ability Company)	egoras.)	
		12205	
The Articles of Organization for this Limited Liability Company		2005 and assigned	
Florida document number <u>LO 500000 29 \</u>	3		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabi	lity company house		
_ Predation Clothing	\		
The new name must be distinguishable and end with the words "Limit "L.L.C."	dd Clability Company," the de	signation "LLC" or the abbreviation	
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)		<u> </u>	
B. If amending the registered agent and/or registered off		ds, 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 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 = Ma MGRM = I	innger Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
	· · · · · · · · · · · · · · · · · · ·		Add Remove
			Add Remove
- Andrewson - Angeles - An			Add Remove
····			Add: Remove
			Add Remove
	·		
D. If amen	ding any other information, enter chang	ge(s) here: (Attach additional sheets, if nec	essary.)
			· · · · · · · · · · · · · · · · · · ·
Dated	The state of the s	008. h D. M. K. MG	ZIBIO DCT 22 PALLAHASS
	Josev	or authorized representative of a member A A A A d or printed name of signee	Fig. P. M.
		Page 2 of 2	2: 38 1655 0RIDA

Filing Fee: \$25.00