L0500097541

(Requestor's Name)
(Address)
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(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Entity Name)
(Document Number)
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SEP 18 2008

EXAMINER



400135982444

09/17/08--01012--020 **25.00

08 SEP 17 PM 3: 08

SECRETARY OF STATE DIVISION OF CORPORATIONS

COVER LETTER

TO:

Registration Section Division of Corporations

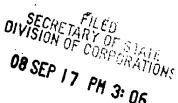
Tallahassee, FL 32314

SUBJECT:		MCSS, LLC				
	(Name of Limi	ted Liability Company)				
The enclosed Articles of A	mendment and fee(s) are sub	mitted for filing.				
Please return all correspond	dence concerning this matter	to the following:				
	Mitch Schacter					
	(Name of Person)					
	MMCSS, LLC					
	(Firm/Company)					
	160 Roycourt Circle					
		(Address)				
	Royal Palm Beach, Florid	la 33411				
	,	(City/State and Zip Code)				
For further information cor	ncerning this matter, please ca	all:				
Mitch Schacter		at (561) 737-9882				
(Name of Person)		(Area Code & Daytime T	elephone 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)			
MAILIN	IG ADDRESS:	STREET/COURIER	ADDRESS:			
Registration Section Division of Corporations		Registration Section Division of Corporation	ine			
P.O. Box 6327		Clifton Building	NI S			

2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



			9. <i>U</i> 5
		SS, LLC	•
(Name of the Limite	d Liability Comp	pany as it now appears on our records.) Liability Company)	
•	(A Florida Lunited	Liaonity Company)	
The Articles of Organization for this Limited	Liability Compar	ny were filed on October 4, 2005	and assigned
Florida document number L05000097541	•		
	·		
This amendment is submitted to amend the fo	llowing:		
A. If amending name, enter the new name	of the limited lis	ibility company here:	
, , , , , , , , , , , , , , , , , , , ,			
The new name must be distinguishable and end w "L.L.C."	vith the words "Lin	mited Liability Company," the designation	"LLC" or the abbreviation
Enter new principal offices address, if appl	icable:	N/A	7700-1
(Principal office address MUST BE A STRE	ET ADDRESS)		
Enter new mailing address, if applicable:		N/A	
Mailing address MAY BE A POST OFFICE	E ROY		
Transaction and Cas Mill DL /11 Obj Of Fice	<u> </u>		
B. If amending the registered agent and	Vor registered o	office address on our records, enter	the name of the new
registered agent and/or the new registered (office address he	ere:	410 11010 01 4110 11011
Name of New Registered Agent:	N/A		
No. Post condition and			
New Registered Office Address:		(Enter Florida street a	(dress)
		į zimor 1 vortuu sirves u	wee vous
		, Florida _	<i>a. a.</i>
		(City)	(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

4 **.**

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>	Address	Type of Action
MGRM	Michele Haugh	160 Roycourt Circle	Add
		Royal Palm Beach, Florida 33411	Remove
			Add Remove
	·		Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amen	ding any other information	n, enter change(s) here: (Attach additional sheets, if necess	ary.)
			-
_			
Dated	September 12		
	Signat	ure of a member or authorized representative of a member	
	v	Mitch Schacter	
		Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00