# L04000034746

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
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SECRETARY OF STATE TALLAHASSEE, FLORIDA

T. CLINE

APR - 1 2011

**EXAMINER** 

## **COVER LETTER**

SUBJECT:	M	ACA LLC			
	Name of Limi				
The enclosed Articles of A	mendment and fee(s) are sub	omitted for filing.			
Please return all correspon	dence concerning this matter	to the following:			
		JESUS PEREZ			
		Name of Person			
	MACA LLC				
	Firm/Company				
		8728 SW 17 COURT Address			
MIRAMAR, FL 33029				7 2	
		City/State and Zip Code		ALL SEC	
	Joper E-mail address: (	rezdelacruz@yahoo.co to be used for future annual repo	ort notification)	AR I	an il.
For further information as	ncerning this matter, please o		•	TAR ASS	Entrate Course
To further information co.	meerining tims matter, please c	an.		2011 HAR 31 AM SECRETARY OF FALLAHASSEE, F	. [i
. JES	US PEREZ	at ( 305 )	244-2337	E= ⟨Λ	C
Name of	Name of Person Area Code & Daytime Telephone Number		Daytime Telephone Number	9: 59 STATE LORID	1
				A C	)
Enclosed is a check for the	e following amount:				
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is en	closed) Certified C	of Status &	sed)

### MAILING ADDRESS:

TO:

Registration Section
Division of Corporations

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

MACA			
(Name of the Limited Liability Compa (A Florida Limited	ny as it now appea	rs on our records.)	
(A Florida Limited	Liaomity Company)		
The Articles of Organization for this Limited Liability Company	y were filed on	06/01/2006	and assigned
Florida document numberL06000034746			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lia	bility company he	<u>re</u> :	
The new name must be distinguishable and end with the words "Lim"L.L.C."	ited Liability Compa	any," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
		3	201
			8
			SE SE
Enter new mailing address, if applicable:			CASE CO LOS CONTROL OF
(Mailing address MAY BE A POST OFFICE BOX)			SEE TO TO
			70
			RE 5
B. If amending the registered agent and/or registered o		our records, <u>enter t</u>	
registered agent and/or the new registered office address her	<u>re</u> :		•
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
		, Florida	
	City	, , , , , , , , , , , , , , , , ,	Zin 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

Type of Action <u>Title</u> **Name** Address MGR MARIA PEREZ 17348 BOCA CLUB APT 602 BOCA RATON FL 33487 Remove ☐ Add Remove Add A Remove ∏ Add Remove ∏Aad Remove Add D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized representative of a member JĒSUS PEREZ Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00