

L060000044195

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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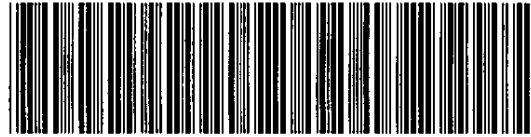
(Business Entity Name)

(Document Number)

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## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: MA of Central Florida 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:

**Marilyn Amendolagine**

(Name of Person)

**MA of Central Florida LLC**

(Firm/Company)

**1898 South Clyde Morris Boulevard #500**

(Address)

**Daytona Beach, FL 32119**

(City/State and Zip Code)

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For further information concerning this matter, please call:

**Marilyn Amendolagine**

(Name of Person)

at ( 386 ) 322-0673

(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**

MA of Central Florida LLC

(Present Name)  
(A Florida Limited Liability Company)

**FIRST:** The Articles of Organization were filed on April 28, 2006 and assigned document number L06000044195.

**SECOND:** This amendment is submitted to amend the following:

Articl IV The name and Street Address of the Registered Agent should read

Marilyn Amendolagine

1898 South Clyde Morris Boulevard #500

Daytona Beach, FL 32119

Article V The name and address of the managng members should read:

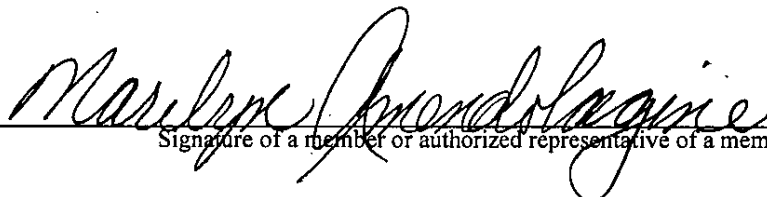
Michael Amendolagine MGRM      1898 South Clyde Morris Boulevard #500

Daytona Beach, FL 32119

Marilyn Amendolagine MGRM      1898 South Clyde Morris Boulevard #500

Daytona Beach, FL 32119

Dated September 5, 2007.



Signature of a member or authorized representative of a member

Marilyn Amendolagine

Typed or printed name of signee

Filing Fee: \$25.00

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Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment of registered agent and agree to act in its capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Register Agent Signature:

*Marilyn Amendolagine*

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