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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: MAC One Group, 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:
Gregory Charlot (Name of Person)
MAC One Group, LLC (Firm/Company)
P.O. BOX 278643 (Address)
Miramar, Florida 33027 (City/State and Zip Code)
For further information concerning this matter, please call:
Cregory Charlot at (305) 494-6591 (Nam) of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) 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



MAC On	e Gro	up, Ll		LLAHASSEE FLORIDA
(Name of the Limited (A	Liability Company Florida Limited Lia	as it now appears on bility Company)	our records.)	
The Articles of Organization for this Limited Lie Florida document number <u>LO70000</u>	ability Company w 3728	vere filed on6	/15/20	o→ and assigned
This amendment is submitted to amend the follo	wing:			
A. If amending name, enter the new name of	the limited liabili	ty company here:		
The new name must be distinguishable and end with "L.L.C."	n the words "Limite	d Liability Company,"	the designation	"LLC" or the abbreviation
Enter new principal offices address, if applica	6303 8 Suite 4	Blue L	agoon Drive	
				33126
Enter new mailing address, if applicable:		P.O. B	0X 278	643
(Mailing address MAY BE A POST OFFICE I	Miramar, FL 33027			
B. If amending the registered agent and/o registered agent and/or the new registered off Name of New Registered Agent:	ice address here:			the name of the new Suite 400 address)
New Registered Office Address:				
	Mian	(City)	, Florida	33126 (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 = Manager

MGRM = Managing Member Title Title <u>Name</u> Address Type of Action Gregory Charlot MGR ☐ Add **Remove** Add Remove ☐ Add ☐ Remove 🗂 Add ☐ Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Please remove existing address for the principal, Registered Agent and Manager on your information and update with new given Drive, Suite 400, Mami FL 33126 CFF November 25 , 2008 PER SENTEN ignature of a member of authorized representative of a nember Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00