L07000111858

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	me)
(Do	ocument Number)	-
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
	·	

Office Use Only



400166260594

02/08/10--01036--013 **35.00

10 FEB 10 PH 12: 15
SECRETARY OF STATE

TO:

Registration Section

CQVER LETTER"

Division of Corporations				
	MARGATE SEE	RVICES AGENCY LL	<u>^</u>	
SUBJECT:		ted Liability Company		
		, ,		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspondent	ondence concerning this matter	to the following:		
		•		
	M	ARTHA RODRIGUEZ		
		Name of Person		
	MARGAT	E SERVICES AGENCY	II.C	
		Firm/Company		
	23	3359C SW 55TH WAY Address		
		runcs		
	BC	CA RATON, FL 33433		
		City/State and Zip Code		
	E-mail address: (rrey@myflins.com to be used for future annual report no	offication)	
Fan 6 - al - in 6 - an - dia-				
	concerning this matter, please of	æn:		
RC	DRIGO REY	_ at (561)	699-7661	
Name of Person			time 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 enclo	Sed) \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Regis Divisi P.O. I	LING ADDRESS: ration Section on of Corporations Box 6327 hassee, FL 32314	STREET/COL Registration Se Division of Cor Clifton Building 2661 Executive Tallahassee, FL	porations g : Center Circle	



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 9, 2010

MARTHA RODRIGUEZ 7857 W SAMPLE ROAD SUITE 133 CORAL SPRINGS, FL 33065

SUBJECT: MARGATE SERVICES AGENCY LLC

Ref. Number: L07000111858

We have received your document for MARGATE SERVICES AGENCY LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Neysa Culligan Regulatory Specialist II

Letter Number: 110A00003262

Rodrigo. 954-561-6501 - FaxIIIS

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED 10 FEB 10 PM 12: 16

MARGATE SERVICES AGENCY, LLOECRETARY OF STATE
(Name of the Limited Liability Company as it now appears on challed the SEE, FLORIDA
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company Florida document numberL07000111858	were filed on11/05/2007 and assigned		
This amendment is submitted to amend the following:	•		
A. If amending name, enter the new name of the limited liab	lity company here:		
The new name must be distinguishable and end with the words "Limit"L.L.C."	sed Liability Company," the designation "LLC" or the abbreviation		
Enter new principal offices address, if applicable:	7857 WEST SAMPLE ROAD		
(Principal office address MUST BE A STREET ADDRESS)	SUITE 133		
	CORAL SPRINGS, FL 33065		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	7857 WEST SAMPLE ROAD SUITE 133		
	CORAL SPRINGS, FL 33065		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	fice address on our records, <u>enter the name of the new</u> e:		
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 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:

2	Name	Address	Type of Action
			Add Remove
			Add Remove
 .			Add Remove
			Add Remove
— -			Add Remove
			Add
f amen	ding any other information, enter c	hange(s) here: (Attach additional sheets, if necessary.)	_
-			SECRETARY OF
 ed	FEBRUARY 10	2010	PH 12: 16 OF STATE FLORIDA
	Signature of a m	manufacture of a member)

Filing Fee: \$25.00