L08000015622

(Re	questor's Name)	
(Add	dress)	
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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Margrey Holdings, 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:	
Thomas T. Coon, Jr., Esq	
Name of Person	
Firm/Company	
F n n / Company	
888 South Andrews Avenue Suite 204	
Address	
Fort Lauderdale, Florida 33316 City/State and Zip Code	
City/State and Zip Code	
<u>thomas@capstonetitlepartners.com</u> E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Thomas T. Coop. Ir 954 > 760-6525	
Thomas T. Coon, Jr. at (954) 760-6525 Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
□ \$25.00 Filing Fee □ \$55.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, 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 ARTICLES OF ORGANIZATION **OF**

FILED 2015 JUN 26 PM 12: 09

SECRETARY OF STATE TALL AGASSEE, FLORIDA

Margrey Holdings, LLC (Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) lability Company)	,, <u>.</u>
The Articles of Organization for this Limited Liability Company	were filed on2/12/2008	and assigned
Florida document number <u>L08000015622</u>		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here. Name of New Registered Agent:		er the name of the n
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 provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as a	performance of my duties, and I an	n familiar with and

accept the obligations of my position as registered agent as provided for in Chapter 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records: MGR = Manager AMBR = Authorized Member **Type of Action** <u>Address</u> **Title** Name MGR Margaret H. Marker 309 Sunset Drive #5 **_X**□ Add FT. Lauderdale, FL 33316 □ Remove _□ Change □ Add _□ Remove _ Change _□ Add □ Remove ☐ Change ☐ Add _□ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add ☐ Remove □ Change

	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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an eft <u>ote:</u>	ive date, if other than the date of filing: (optional) fective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ment's effective date on the Department of State's records.
ree The	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of a 90th day after the record is filed.
ated	
	Signature of a member or authorized representative of a member
	Walter G. Marker, II

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Filing Fee: \$25.00