## L0900007032/

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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A. LUNT

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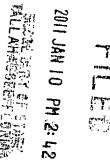
**EXAMINER** 

Office Use Only



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## **COVER LETTER**

TĢ: Registration :				
SUBJECT:	MacSe	ea Group, LLC		
		ited Liability Company		
The enclosed Articles of	of Amendment and fee(s) are su	bmitted for filing.		
Please return all corres	pondence concerning this matte	r to the following:		
	***************************************	Eugenio F Jaime	· · · · · · · · · · · · · · · · · · ·	
		Name of Person		
	•	MacSea Group, LLC		
Firm/Company				26
		750 NE 7th Avenue		
		Address		
	n	ania Beach, FL 33004		page 1
		City/State and Zip Code		PH 2
	Euge	enio@Macseagroup.com		£ 5
	E-mail address:	to be used for future annual report no	stification)	E N
For further information	concerning this matter, please	eall:		
Eu	genio F Jaime	at ( 813 )	600-7229	
	of Person	Area Code & Dayt	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 enclos	sed) Certified C	of Status &
MAILING ADDRESS: Registration Section		STREET/COUI	RIER ADDRESS:	

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
- 2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

•	MacSea Group, Ll	LC		
(Nan	ne of the Limited Liability Company as it no (A Florida Limited Liability Co	<u>w appears on our recor</u> mpany)	rds.)	
The Articles of Organization fo	or this Limited Liability Company were filed	I on07/20/20	010 and assigned	
Florida document number	L09000070321			
This amendment is submitted to	o amend the following:			
A. If amending name, enter t	the new name of the limited liability comp	any here:		
The new name must be distinguis "L.L.C."	hable and end with the words "Limited Liabilit	y Company," the design	nation "LLC" or the abbreviation	
Enter new principal offices a	ddress, if applicable:			
(Principal office address MUS	T BE A STREET ADDRESS)		<u> </u>	
			The same	
Enter new mailing address, if	applicable:			
(Mailing address MAY BE A I	POST OFFICE BOX)		3	
_			Er. is	
B. If amending the register registered agent and/or the new property and/or the new property and/or the new property and the new property and the property and the new propert	red agent and/or registered office addre ew registered office address here:	ss on our records,	enter the name of the new	
The state of the s	The state of the s			
Name of New Registe	red Agent:			
New Registered Offic	e Address:			
	·	Enter Florida str	eet 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

or Managing Member being added or removed from our records: MGR = Manager MGRM = Managing Member Title **Name** Address Type of Action **MGRM Christopher Moore** 750 NE 7th Avenue **✓** Add Dania Beach, Ft. 33004 Remove Remove ☐ Add Remove Ĩ A₫d Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated \_ Signature of a member or authorized representative of a member Eugenio F Jaime Typed or printed name of signee

If, amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager

Page 2 of 2

Filing Fee: \$25.00