L09000078914

(Re	questor's Name)	
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(Cit	y/State/Zip/Phone	#)
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FILEU 2009 SEP 21 PM T: 5 SECRETARY OF STAT

. The Witness

C. LEWIS

SEP 2 2 2009

EXAMINER

COVER LETTER

TO: Registration S Division of Cor	ection rporations	^				
SUBJECT:	MICMA	GROUP LLC				
	Name of Limi	ted Liability Company				
The enclosed Articles of	f Amendment and fee(s) are sub	mitted for filing.				
Please return all correspondent	ondence concerning this matter	to the following:				
		MARIO D. AHUMADA				
	Name of Person					
MICMA GROUP LLC						
Firm/Company						
105 OAK VIEW CIR Address						
					LAKE MARY , FL 32746	
City/State and Zip Code						
	MAHUMADA@CFLRR.COM E-mail address: (to be used for future annual report notification)					
For further information	concerning this matter, please of	•	nication)			
MAR	IO D AHUMADA	at (407)	474-0817			
Name	of Person	Area Code & Dayti	me 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 enclose	S60.00 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

FILED
2009 SEP 21 PM 1: 55
SECRETARY OF STATE ASSECTED A

	MA GROUP LLC		SEURCIASSEE, FLU
(Name of the Limited Liable (A Florid	lity Company as it now appears la Limited Liability Company)	on our records.)	ACC
The Articles of Organization for this Limited Liability		08/03/09	and assigned
Florida document number L09000078914	·		
This amendment is submitted to amend the following	:		
A. If amending name, enter the new name of the li	imited liability company here	:	
MIC	CMA GROUP LLC		_
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Compar	ny," the designation "	LLC" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET AD	DRESS)		
		<u></u>	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
	<u></u>		
B. If amending the registered agent and/or re		ur records, <u>enter</u>	the name of the new
registered agent and/or the new registered office a	iddress here:		
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
		, Florida _	
	City		Zip Code
New Registered Agent's Signature, if changing Regist	tered 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: MGR = Manager MGRM = Managing Member Title **Name** Address Type of Action ☐ Add Remove ☐ Add Remove ☐ Add Remove Add Remove Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) THE ARTICLES OF ORGANIZATION HAS BEEN AMENDED TO SHOW A CHANGE OF OWNERSHIP INTEREST FOR MARIO D AHUMADA FROM 50% PREVIOUSLY OWNED TO 51% CURRENTLY OWNED. MRS. MICHELLE DELORA OWNERSHIP CHANGED FROM 50% TO 49% BOTH MANAGING MEMBERS CONSENTED TO THIS CHANGE ON 09/15/09 SEPTEMBER 15 Dated _ a member or anthorized representative of Signature IARIO D ÁHUMADA, MÁRM --- MICHELLE DELORA MÁRM Typed or printed name of signee Page 2 of 2 Filing Fee: \$25.00