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CORETARY OF STATE

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T. CLINE
DEC - 4 2009
EXAMMER

Alejandro Cantero PO BOX 4351 Miami Lakes, FL 33014 November 25, 2009

Registration Section Division of Corporations PO BOX 6327 Tallahassee, FL 32314

Dear Sir or Madam:

The purpose for this amendment is to add **Lina T. Cantero** as a member of the LLC. Please contact me if you need further information or there are errors in the form.

Sincerely,

Alejandro Cantero

Manager

Magxel, LLC (305)6064026

2009 DEC -3 AM 10: 39

SECRETARY OF STATE
AND ARREST FIRE

COVER LETTER

TO: Registration S Division of Co	Section prporations		
SUBJECT:	MA	GXEL, LLC	
	Name of Lim	ited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are suit	bmitted for filing.	
Please return all corresp	ondence concerning this matter	r to the following:	
	AL	EJANDRO CANTERO	
		Name of Person	
		MAGXEL, LLC	
		Firm/Company	1.00K
		PO BOX 4351	
		Address	ZOUS DET
	MI	AMI LAKES, FL 33014	
		City/State and Zip Code	SS &
	ai	ex20037@gmail.com	
	E-mail address: (to be used for future annual report notifica	tion)
For further information	concerning this matter, please of	call:	239 2004
	NDRO CANTERO	at (064026
Name	of Person	Area Code & Daytime T	elephone Number
Enclosed is a check for t	the following amount:		
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 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

MAGXE	L, LLC			
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appear Liability Company)	s on our records.)		
The Articles of Organization for this Limited Liability Company	were filed on	8/24/2009	and assigned	
Florida document numberL0900081306				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	oility company her	<u>e</u> :		
The new name must be distinguishable and end with the words "Lim"L.L.C."	ited Liability Compar	ny," the designation	"LLC" or the abbre	 eviation
Enter new principal offices address, if applicable:			ECAL BOR	
(Principal office address MUST BE A STREET ADDRESS)			TAISS	<u> </u>
	*		SEY B	\$\[\frac{1}{2}\frac{1}
Enter new mailing address, if applicable:	PO BOX 4351	1	STAI STAI	*
(Mailing address MAY BE A POST OFFICE BOX)	MIAMI LAKES	S, FL 33014	75° U	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		ur records, <u>ente</u>	the name of th	e new
registered agent and/or the new registered office address ner	<u>c.</u>			
Name of New Registered Agent:				
New Registered Office Address:	Ent	er Florida street a	dduana	
	Eni		પાતા દકક	
	City	, Florida _	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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Ac	<u>:tion</u>
MGRM	LINA T. CANTERO		☑ Add ☐ Remove	
			Add Remove	
· · · · · · · · · · · · · · · · · · ·			Add Remove	
			Add Remove	
<u>,</u> _			□Add □Remove	
			_Add _Remove	
D. If amen 	ding any other information, enter	change(s) here: (Attach additional sheets, if necessary.)	5	the first state of the state of
Dated		2009	39	
		nember or authorized representative of a member ALEJANDRO CANTERO		
		Typed or printed name of signee		

Page 2 of 2

Filing Fee: \$25.00