Florida Department of State

Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H09000228430 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : JACOBS & PETERS, P.A.

Account Number: J19980000094

Phone

: (904)261-3693

Fax Number

: (904)261-2866

LES AMND/RESTATE/CORRECT OR M/MG RESIGN

MCM 88, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu OCT 27 2009

Help

(((H09000228430 3)))

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MCM 88	B, LLC_	
(Name of the Limited Liability Compan (A Florida Limited L	y as it now appears on our records ability Company)	<u>,</u>)
The Articles of Organization for this Limited Liability Company Florida document number	were filed on OCTOBER 12,	2009 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
MICHAEL CHARLES	MORRISON, LLC	
The new name must be distinguishable and end with the words "Limit "L.L.C."	ed Liability Company." the designati	on "LLC" or the abbreviation
Enter new principal offices address, if applicable:		<u> </u>
(Principal office address MUST BE A STREET ADDRESS)		8 28
		7 7≥
Enter your mailing address if aunticables		න පුදිර
Enter new mailing address, if applicable:		7 70
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here		ter the name of the 100w
Name of New Registered Agent:		
New Registered Office Address:		
TVV Tegritori O mod Tradicia.	Enter Florida street address	
	, Florid	a
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agree the provisions of all statutes relative to the proper and complet accept the obligations of my position as registered agent as publing filed to merely reflect a change in the registered office of company has been notified in writing of this change.	ete performance of my duties, ar rovided for in Chapter 608, F.S. address. I hereby confirm that th	nd I am familiar with and Or, if this document is ne limited liability
If Chan	ging Registered Agent, <u>Signature of Ne</u>	w Registered Agent

(((H09000228430 3)))

Page 1 of 2

9042617879

(((H09000228430 3)))

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 = M MGRM =	anager Managing Member		
<u>itle</u>	<u>Name</u>	Address	Type of Action
			— <u> </u>
			
<u> </u>			Add Remove
<u> </u>			— -
If amen	ding any other information, enter char	nge(s) here: (Anach additional sheets, if necession	SECRETARY NVISION OF CO
 atcd	October 26, 2009.		AM 8: 50
	X Much Signature of a memb	er or authorized representative of a member	
		el Morrison	
	Туре	ed or printed name of signec	

Page 2 of 2

Filing Fee: \$25.00

(((H09000228430 3)))