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2018 DEC 11 PH 12: 14

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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Morgan Group of Centeral Florida, 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:
PAMEIA MANDELL Name of Person
Morgan Group of Central Florida, LLC.
Address Too: 484 Al. Note Loop Address
Lake MARY FL 3277/ City/State and Zip Code
Morgan Group of CFL of Mail E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
PAMEIA MANDELL at 407 756-9867 Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee
Certificate of Status Certified Copy Certificate of Status
(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 TO ARTICLES OF ORGANIZATION OF

MOGGN GOOF C Name of the Limited Lin (A Flo	bility Company orida Limited Lie	era Flow appeability Company	ars on our records.)	
The Articles of Organization for this Limited Liabi	lity Company v	vere filed on	3/5/2010	and assigned
Florida document number	0 24.8 20	2		
This amendment is submitted to amend the following	ng:			
A. If amending name, enter the new name of the	e limited liabil	ity company h	ere:	
Morgan Group of Centra The new name must be distinguishable and end with the "L.L.C."	e words "Limite	da, LLC. ed Liability Com	pany," the designatio	n "LLC" or the abbreviation
Enter new principal offices address, if applicable	e:			<u></u>
(Principal office address MUST BE A STREET A	DDRESS)			······································
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>X)</u>	<u>484</u> Lake	Alinale	LOOP FL. 32746
B. If amending the registered agent and/or registered agent and/or the new registered office			our records, ent	er the name of the new
Name of New Registered Agent:	'	· - · · · · · · · · · · · · · · · · · ·	<u> </u>	
New Registered Office Address:	484	Alinol	e 100p	E. 2
_	Lake	Mary	nter Florida street	32746
New Registered Agent's Signature, if changing Reg	istered Agent:	City '		address 32 796
I hereby accept the appointment as registered a the provisions of all statutes relative to the prop	gent and agre	e to act in this	capacity. I further	agree to comply with

If Changing Registered Agent, Signature of New Registered Agent

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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Ma MGRM = i	anager Managing Member		
Title	Name	Address	Type of Action
			Add
			Remove
			Add
			Remove
			Add
			Remove
			Add
			Remove
			Add Remove PM Add
			Remove SSE
			Add Add
			Remove

D. If an	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
•	
Dated	12-2-2013, 2013.
	Yomal Mandell
	Signature of a member or authorized representative of a member
	PAMEIA MANDELL
	Typed or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00

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