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B. BOSTICK

AUG 2 1 2013

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

UBJECT: Mager Empowerment, 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:

Scott Mager

Name of Person

Mager Empowerment, LLC

Firm/Company

5740 Hollywood Blvd, Ste. 500

Address

Hollywood, FL 33021

City/State and Zip Code

scott@ariaslawgroup.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Scott Mager

786,728-8700

Name of Person

Area Code & Daytime Telephone Number 5

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 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

Mager Empowerment, LLC (Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records Liability Company))
The Articles of Organization for this Limited Liability Company Florida document number <u>L10000060159</u> .	were filed on 06/04/2010	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and end with the words "Lim" "L.L.C."	ited Liability Company," the designati	on "LLC" or the abbreviation
Enter new principal offices address, if applicable:	5740 Hollywood Blvd.	Γ _Α 2
(Principal office address MUST BE A STREET ADDRESS)	2nd Floor	
	Hollywood, FL 33021	\$ 6
Enter new mailing address, if applicable:	5740 Hollywood Blvd.	19 PF
(Mailing address MAY BE A POST OFFICE BOX)	Ste. 500	2:
	Hollywood, Florida 33021	51
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her Name of New Registered Agent: 5740 Holly		ter the name of the nev
New Registered Office Address: 5740 Holly	WOOD BIVD., Ste. 500 Enter Florida stree	t addrass

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.

City

Hollywood

_, Florida <u>3</u>3021

Zip Code

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 **Title Type of Action** <u>Name</u> <u>Address</u> Remove Remove Remove Remove

	ion, enter change(s) here: (Attach additional sheets, if necessary.)
August 2nd	2013
XX	
Sign	nature of a plember or authorized representative of a member
Scott Mager	
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00