

L10 000 103570

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

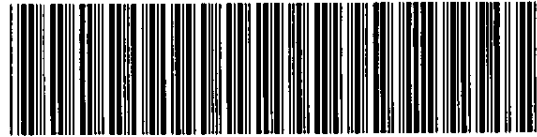
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2017 MAR 15 A 9 04

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MAR 16 2017

BAKER DONELSON
BEARMAN, CALDWELL & BERKOWITZ, PC

200 SOUTH ORANGE AVENUE
SUITE 2900

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ORLANDO, FLORIDA 32802

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JANICE A. DEJULIO, CP
Direct Dial: 407.367.5428
E-Mail Address: jdejulio@bakerdonelson.com

March 14, 2017

VIA FEDERAL EXPRESS
OVERNIGHT PRIORITY

Division of Corporations
Attn: Registration Section
Clifton Building
2661 West Executive Center Circle
Tallahassee, FL 32301
Tel: (850) 245-6051

Re: Request to Filing of Articles of Amendment to Articles of Organization for
Macedonia Panama City, LLC, a Florida limited liability company
(L10000103570)

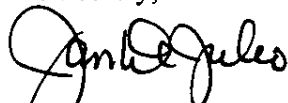
Dear Filing Agent:

Enclosed please find the above-referenced Articles of Amendment to Articles of Organization of Macedonia Panama City, LLC, along with the form cover letter, changing the title of Todd Menowitz from "Managing Member" to "Manager."

Also enclosed is our firm's Check No. 003256 payable to the Florida Department of State for the \$25.00 filing fee, plus an extra copy of the document for you to stamp with filing date and return to us in the enclosed pre-stamped envelope.

Thank you in advance for your help.

Sincerely,



Janice A. DeJulio, CP

Enclosures

4847-4477-8821 v1
2925097-000013

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Macedonia Panama City, 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:

Martha Anderson Hartley, Esq.

Name of Person

Baker, Donelson, Bearman, Caldwell & Berkowitz, PC

Firm/Company

200 South Orange Avenue, Suite 2900

Address

Orlando, Florida 32801

City/State and Zip Code

Todd@menowitz.com

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

For further information concerning this matter, please call:

Martha Anderson Hartley, Esq.

at (407) 367-5427

Name of Person

Area Code

Daytime 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 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**

Macedonia Panama City, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on October 4, 2010 and assigned
Florida document number L10000103570

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address 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 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 605, 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

FILED
MAR 15 2011
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
9:04

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated March 9 2017

March 9, 2017

[Signature]

Signature of a member or authorized representative of a member

Todd Menowitz

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

SECRETARY OF STATE,
TALLAHASSEE, FLORIDA

דבר