# L11000004719

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
、 PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
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OIVISION OF CORPERATION

T. HAMPTON

JAN 24 2011

**EXAMINER** 

## **COVER LETTER**

TO: Registration Se Division of Cor			
SUBJECT: MAC F	inancial, LLC		
	(Name of Limit	ited Liability Company)	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Gerson Hernand		
		(Name of Person)	
	1-800-COMPANY		
		(Firm/Company)	
	28015 Smyth Dr.		
		(Address)	
	Valencia, CA 9	1355	
		(City/State and Zip Code)	
For further information of	oncerning this matter, please ca	all:	
Gerson Hernan		at ( <u>661 ) 310-2823</u>	
(Name o	of Person)	(Area Code & Daytime To	elephone Number)
Enclosed is a check for the	ne following amount:		
\$25.00 Filing Fee	□\$30.00 Filing Fee & Certificate of Status	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

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

ARTICLES OF ORGANIZATION OF

11 JAN 21 PH 1:47

MAC Financial, LLC		
(Name of the Limited Liabilit (A Florida	y Company as it now appears on Limited Liability Company)	our records.
The Articles of Organization for this Limited Liability (Florida document number <u>L11000004719</u>	Company were filed on <u>Janua</u>	ary 12, 2011 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	
The new name must be distinguishable and end with the we "L.L.C."	ords "Limited Liability Company,"	the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	RESS)	
	<u></u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office ade		records, <u>enter the name of the new</u>
Name of New Registered Agent:		
New Registered Office Address:		
	(Enter	Florida street address)
<u></u>		, 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 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 Changing Registered Agent, Signature of New Registered Agent)

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	Туре	e of Action
MGRM	Littlet	on Properties	<u>L</u> LC	73 Greentree Drive #73 Dover, DE 19904	_□ A _ <b>∑</b> Re	dd emove
MGRM	Littlet	on Holdings,	_LLC	73 Greentree Dr. #43 Dover, DE 19904	_ <b>⊠</b> A∂ _□ R∂ 	dd emove
			_			dd emove
			_			dd emove
			<del></del>		_□ Ad _□ Re 	
					_□ Ad _□ Re	
D. If a	mending any other	information, enter o	change(s	) here: (Attach additional sheets, if necessary.)	II JAN ZI FA I: 4/	
Dated _	January 20	A.	2011		_	<u>.</u>
	U			authorized representative of a member		
		Gerson Herr	nandez Typed or i	printed name of signee		