

L11000022169

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

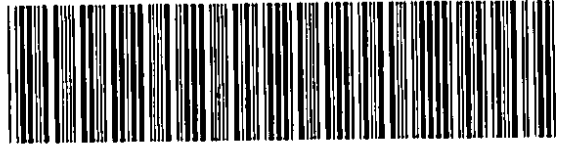
(Business Entity Name)

(Document Number)

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2019 JAN 22 AM 9:54

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D. BRUCE
JAN 28 2019

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: MARLFRE, 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:

T JONATHON TURNER

Name of Person

Firm/Company

12794 FOREST HILL BLVD STE 10

Address

WELLINGTON, FL 33414

City/State and Zip Code

JONATHON@CASTLEBERRYFINANCIALSERVICES.COM

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

For further information concerning this matter, please call:

T JONATHON TURNER

561 781-7712
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

FILED
JAN 22 2019
AM 9:44
TALLAHASSEE, FL

FILED

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

MARLFRE, 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 02/22/2011 and assigned
Florida document number L11000022169.

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:

GARY ROSENBERG, P.A.

New Registered Office Address:

1555 N. PARC DE #105

Enter Florida street address

WESTON

City

Florida

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

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	ALVAREZ, MARJORIE	6346 LANTANA RD #65 LAKE WORTH, FL 33463	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	NORMAN M STRELL	12794 FOREST HILL BLVD STE10A WELLINGTON 33414	<input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove
GM	T JONATHON TURNER	12794 FOREST HILL BLVD STE10A WELLINGTON 33414	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove
Mgr	FREDDIE RIVERA	4471 LUXEMBURG CT APT301 LAKE WORTH, FL 33467	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change

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2019 JAN 22 AM 9:14
CLERK OF DISTRICT COURT
NORTH DALLAS COUNTY, TEXAS

2019 JAN 22 AM 9:54
HALLMARK STORE

FILED
2019 JAN 22 AM 9:44
CLERK OF DISTRICT COURT
SOUTHERS DISTRICT OF INDIANA
INDIANAPOLIS, IN

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.

Dated 01/12 2019

Ar.

Signature of a member or authorized representative of a member

FREDDIE RIVERA

Freddie Rivera

Typed or printed name of signee