Florida Department of State Division of Corporations

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LAW OFFICES OF STEINBERG & ASSOCIATES, P.A.

Account Number : I19980000080 : (305)538-2344 Phone

: (305)538-0419

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

M&G NE 2ND AND 6TH, LLC

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\$25.00

Electronic Filing Menu

Corporate Filing Menu

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SEP 1 2 2013

T. HAMPTON

9/11/2013

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COVER LETTER

TO:

Registration Section
Division of Corporations

M&G NE 2ND AND 6TH, 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:

MARK ALHADEFF

Name of Person

ALHADEFF LAW GROUP

Firm/Company

767 ARTHUR GODFREY ROAD

Address

MIAMI BEACH, FL 33013

City/State and Zip Code

MARK@ALHADEFFLAW.COM

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

For further information concerning this matter, please call:

MARK ALHADEFF

,,,305,538-2344

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 Capy
(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

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

M&G NE 2ND AND 6TH, 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 Florida document number L11000094441	were filed on 08/15/2011	and assigned
This amendment is submitted to amend the following:		FILI SEP 11
A. If amending name, enter the new name of the limited liab	oility company here:	ED X 7
The new name must be distinguishable and end with the words "Lim"L.L.C."	ited Liability Company," the design	ation Dix" of the abbreviation
Enter new principal offices address, if applicable:	1210 Michigan Ave	
(Principal office address MUST BE A STREET ADDRESS)	Miami Beach, FL 33139	
Enter new mailing address, if applicable:	1210 Michigan Ave	
(Mailing address MAY BE A POST OFFICE BOX)	Miami Beach, FL 33139	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	_	·
	Enter Florida str	eet address
	, Flor	ida
	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

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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 = Mans MGRM = Ma	nger Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add .
			Remove
· .			Add
			Remove
·			Add
			Remove
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		E, FLORIDA	op Jada
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If amending any othe	r information, enter change(s) here: (Attach additional sheets, if necessary.)
9/11	2013
	/m /m/
	Signature of a interpret or authorized representative of a member
	Typed or printed name of signee

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Filing Fee: \$25.00