

LR2000015147

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(Address)

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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: MAC R&D 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:

MATT RIPLEY  
Name of Person

Firm/Company

390 NORTH ORANGE AVE., SUITE 2300  
Address

ORLANDO, FL. 32801  
City/State and Zip Code

MIRIPLEY009@GMAIL.COM  
E-mail address: (to be used for future annual report notification)

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For further information concerning this matter, please call:

MATT RIPLEY at ( 407 ) 350-2899  
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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**

MAC R: D 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 2/1/2012 and assigned  
Florida document number L12000015147.

This amendment is submitted to amend the following:

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

D.A.R.T. CONSTRUCTION LLC

The new name must be distinguishable and end with 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)**

390 NORTH ORANGE AVE.  
SUITE 2300  
ORLANDO, FL. 32801

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

390 NORTH ORANGE AVE.  
SUITE 2300  
ORLANDO, FL. 32801

**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:

390 N. ORANGE AVE., SUITE 2300  
Enter Florida street address

ORLANDO, Florida 32801  
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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

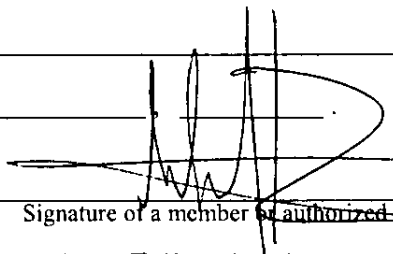
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	MATTHEW RIPLEY	1765 BARRETT LEAF LN.	<input type="checkbox"/> Add
		LONGWOOD, FL. 32750	<input checked="" type="checkbox"/> Remove
MGRM	ARIELLE RIPLEY	1765 BARRETT LEAF LN.	<input type="checkbox"/> Add
		LONGWOOD, FL. 32750	<input checked="" type="checkbox"/> Remove
MGRM	MATTHEW RIPLEY	390 NORTH ORANGE AVE.	<input checked="" type="checkbox"/> Add
		SUITE 2300	<input type="checkbox"/> Remove
		ORLANDO, FL. 32801	
MGRM	ARIELLE RIPLEY	390 NORTH ORANGE AVE.	<input checked="" type="checkbox"/> Add
		SUITE 2300	<input type="checkbox"/> Remove
		ORLANDO, FL 32801	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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JUL 5 2011

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

Dated 7/11/2013

  
Signature of a member ~~or~~ authorized representative of a member

MATTHEW J. RIPLEY

Typed or printed name of signee

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Filing Fee: \$25.00

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