## #/ 12000047817

(Re	questor's Name)	
(Ad	dress)	,
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(Cit	ry/State/Zip/Phone	÷#)
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K.SALY EXAMINER SUN 1.1 2012

## **COVER LETTER**

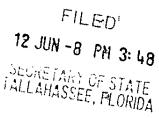
	tion Section of Corporations					
SUBJECT:	MAD ACC	QUISITIONS 2, LLC				
	Name of Limited Liability Company					
The enclosed Artic	cles of Amendment and fec(s) are s	ubmitted for filing.				
Please return all co	orrespondence concerning this matte	er to the following:				
	<del></del>	Camilo Aldama				
		Name of Person				
	Firm/Company					
		16400 NW 59th AVE				
		Address	·······			
	1	Mlami Lakes, FL 33014				
		City/State and Zip Code	·· — · · · · · · · · · · · · · · · · ·			
	caldama@prestigecompanies.net  B-mail address: (to be used for future annual report notification)					
For further inform	ation concerning this matter, please		····•			
	Camilo Aldma	at ( 305 ) 3	70-4540			
1	Name of Person	, m (				
Enclosed is a check	k for the following amount:					
\$25.00 Filing F	Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certificate 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



(Name of the Limited L	ACQUISI	TIONS 2, LLC	S OU OUT TOCOPIE			
(Name of the Limited L (A F	lorida Limited L	iability Company)	s dir dur Jecords.)			
The Articles of Organization for this Limited Liab	oility Company	were filed on	04/09/2012	and assigned		
Florida document numberL12000047817						
This amendment is submitted to amend the follow	ring:					
A. If amending name, enter the new name of the	he limited liab	lity company here	<b>2</b> :			
The new πame must be distinguishable and end with t"L.L.C."	he words "Limi	ted Liability Compar	ny," the designation "L	LC" or the abbreviation		
Enter new principal offices address, if applicable:		3040 McDonald ST				
(Principal office address MUST BE A STREET	ADDRESS)	Mlaml, FL 33133				
				· · · · · · · · · · · · · · · · · · ·		
Enter new mailing address, if applicable:		3040 McDonald ST				
(Mailing address MAY BE A POST OFFICE BO	<u>2X)</u>	Mlami, FL 33133				
B. If amending the registered agent and/or registered agent and/or the new registered office			ur records, <u>enter t</u>	he name of the new		
Name of New Registered Agent:	Name of New Registered Agent: MARIANNIE CORDOVEZ					
New Registered Office Address: 3040 McDonald ST						
· · · · · · · · · · · · · · · · · · ·	Enter Florida street addres					
		Mlami	, Florida	33133		
		City		Zip Code		
New Registered Agent's Signature, if changing Re-	elstered Agent:					
I hereby accept the appointment as registered the provisions of all statutes relative to the proaccept the obligations of my position as registe being filed to merely reflect a change in the rescompany has been notified in writing of this ch	per and complered agent as pagistered office	lete performance/j provided/jør in/2h	f my duties, and I a apter 608, F.S. Or,	m familiar with and if this document is		

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 2

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

Title	Name	Address	Type of Action
MGR	MARIANNIE CORDOVEZ	3040 McDonald ST Miaml, FL 33133	Add ☐ Remove
MGR_	MAID Acquisitions Holdi	16400 NW 59TH AVENUE Miami Lakes, EL 33014	Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If ame	nding any other information, enter chang	ge(s) here: (Attach additional sheets, if necessary.)	_
_			_
-		1	
Dated		<u></u>	
	Mariannie C	er or authorized representative of a member  COOCE  d or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00