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L12 000057052

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

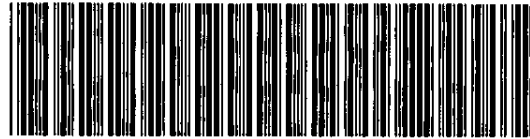
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JAN - 8 2014

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 30, 2013

GARY WALKER, ESQUIRE
ALLEN DELL, P.A.
202 S. ROMA AVE, SUITE 100
TAMPA, FL 33606

SUBJECT: MGA PRO, LLC
Ref. Number: L12000057052

We have received your document for MGA PRO, LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tammi Cline
Regulatory Specialist II

Letter Number: 113A00029278

SECRETARY OF STATE
TAMPA, FLORIDA 33604

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **MGA Pro, 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:

Gary Walker, Esquire

Name of Person

Allen Dell, P.A.

Firm/Company

202 S. Rome Ave., Suite 100

Address

Tampa, FL 33606

City/State and Zip Code

sbaker@allendell.com

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

For further information concerning this matter, please call:

Gary Walker, Esquire

Name of Person

at (**813**) **225-5351**

Area Code & Daytime Telephone Number

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TALLAHASSEE, FLORIDA

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Enclosed is a check for the following amount:

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

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

MGA PRO, 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 04/26/2012 and assigned
Florida document number L12000057052.

This amendment is submitted to amend the following:

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

n/a

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:

n/a

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

n/a

(Mailing address MAY BE A POST OFFICE BOX)

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CLERK OF THE COURT
JUDICIAL CIRCUIT IN AND FOR
THE COUNTY OF HILLSBORO
FLORIDA

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 Walker, Esquire

New Registered Office Address: 202 S. Rome Avenue, Suite 100

Enter Florida street address

Tampa, Florida 33606

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.

Gary Walker
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

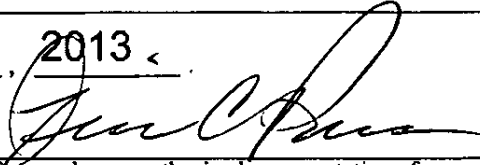
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
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ALABAMA
TALLAHASSEE

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

n/a

Dated December 13, 2013



Signature of a member or authorized representative of a member

Kevin Powers, MGR

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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CLERK HARRY SPENCE
TALMADGE COUNTY CLERK'S OFFICE