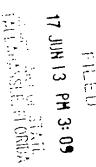
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Office Use Only



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06/02/17--01612--026 **33.06



S. WARREN Jun 1 5 2017



June 5, 2017

RENZO MAZZINI 2553 SW 20 STREET MIAMI, FL 33145

SUBJECT: MARCFIELDS, LLC Ref. Number: L12000087655

We have received your document for MARCFIELDS, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

The document number of the name conflict is L07000063458 R & M CAPITAL, LLC.

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.

Stacey M Warren Regulatory Specialist II

Letter Number: 317A00011219

COVER LETTER

TO:	Registration Ser Division of Corp			
CHDIE	CT.		ARCFIELDS, LLC	
SUBJE	CCT:		ited Liability Company	
The end	closed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspon	ndence concerning this matter	to the following:	
			RENZO MAZZINI	
			Name of Person	
			Firm/Company	
			2553 SW 20 ST	
			Address	.
			MIAMI, FL 33145	
			City/State and Zip Code	
		E-mail address: (marcfieldsllc@gmail.com to be used for future annual report notifi	ication)
For fur	ther information co	oncerning this matter, please ca	મો!:	
	RENZO M	MAZZINI	at (305) 992-	8244
	Name of	Person		Telephone Number
Enclose	ed is a check for th	c following amount:		
	5.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		NG ADDRESS: ation Section	STREET/COURING Registration Section	

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MARCFIELDS	
(Name of the Limited Liability Compan (A Florida Limited L	y as it now appears on our records.) lability Company)
The Articles of Organization for this Limited Liability Company of Plorida document number	were filed on 07/02/2012 and assigned
his amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	lity company here:
MARCFIELDS-CAPITA	L MANAGEMENT, LLC
he new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "L.L.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	2520 CORAL WAY
Principal office address MUST BE A STREET ADDRESS)	SUITE 2-186
	MIAMI, FL 33145
Enter new mailing address, if applicable:	2520 CORAL WAY
Mailing address MAY BE A POST OFFICE BOX)	SUITE 2-186
	MIAMI, FL 33145
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here Name of New Registered Agent: New Registered Office Address:	·
	, Florida
	City Zin 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 facument 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 amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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			□ Rеточе
			D Add
			□ Remove
			☐ Change
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			□ Remove
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ective date, if other the effective date is listed, the date. If the date inserted in	an the date of filin late must be specific and this block does not a	g:d cannot be prior to date	of filing or more than statutory filing require	(optional) 0 days after filing.) I	Pursuant to 605.03
ument's effective date or				The state of the s	
record specifies a di			effective time, a	t 12:01 a.m. or	n the earlier
			.e.)		
he 90th day after th		, <u>20</u> /1 .		== :	17
he 90th day after th		. <u>2011</u> .			17 JUN
he 90th day after th	Sh enat ure of a	TIM	representative of a men	tber	17 JUN 13
he 90th day after th	Signature of a	TIM	representative of a men	aber (2)	TILED 17 JUN 13 PM

Page 3 of 3

Filing Fee: \$25.00