L12000094478

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

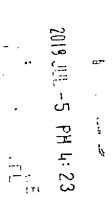
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JUL 15 2019



COVER LETTER

Division of Corp	orations		
MMG12, LL			
30182011		ited Liability Company	
The enclosed Articles of A	mendment and fee(s) are sub-	mitted for filing.	
Please return all correspond	dence concerning this matter	to the following:	
	Chris Gleason		
		Name of Person	
	MMG12, LLC		
		Firm/Company	
	2655 1st Street, Suite 250		
		Address	
	Simi Valley, CA 93065		
	chris.gleason@mmgcap.con	City/State and Zip Code	
	E-mail address: (t	to be used for future annual report notif	ication)
For further information con	ncerning this matter, please ca	ail:	
Chris Gleason		805 657-1158	
Name of I	Person		: 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 Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section

TO:

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

MMG12, LLC

2019 JUL -5 PM 4: 23

(Name of the Limited Liability Compa (A Florida Limited	iny as it now appears on our records.) Liability Company)			
The Articles of Organization for this Limited Liability Company Florida document number L12000094478	were filed on 7/23/2012 and assigne			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	oility company here:			
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."			
Enter new principal offices address, if applicable:	2655 1st Street, Suite 250			
(Principal office address MUST BE A STREET ADDRESS)	Simi Valley, CA 93065			
Enter new mailing address, if applicable:	2655 1st Street, Suite 250			
(Mailing address MAY BE A POST OFFICE BOX)	Simi Valley, CA 93065			
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her				
Name of New Registered Agent:	 			
New Registered Office Address:				
	Enter Florida street address			
	, Florida			
New Registered Agent's Signature, if changing Registered Agent:	City Zip Code			
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as a being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document			

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Ac
MGR	Christopher Gleason	2655 1st Street, Suite 250 Simi Valley, CA 93065	≘ Add
			Remove
			Change
AMBR	Christopher Gleason	4450 Cedarglen Ct. Moorpark, CA 93021	
			Remove
			Change
MGR	Robert Marlin	2403 River Tree Circle Sanford, FL 32771	
			Remove
			Add
			Remove
			Change
			
			□ Remove
			Change
			Add
			Remove
			Change

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E. Effective da	te, if other than the date of filing: (optional)	
(If an effective of	late is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to date inserted in this block does not meet the applicable statutory filing requirements, this date will not be	
	effective date on the Department of State's records.	113.00 43
If the record s	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the ea	arlier of
	day after the record is filed.	
Dated July 1	2019	
4		_
	Signature of a member or authorized representative of a member	
С	hristopher Gleason	
-	Typed or printed name of signee	-

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

Page 3 of 3

Filing Fee: \$25.00