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(Business Entity Name)

(Document Number)

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: MMG12 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:

Robert Marlin
Name of Person
MMG 12 LLC
Firm/Company
9801 Collins Ave. Suite 5i
Address
Bal Harbour, FL 33154
City/State and Zip Code
4bmarlin@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Robert Marlin	619	7874441
Name of Person	Area Code	Daytime 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
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**

MMG 12 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 7/23/2012 and assigned
Florida document number L12000094478.

This amendment is submitted to amend the following:

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

The new name must be distinguishable and contain 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)

9801 Collins Ave. Suite 5i

Bal Harbour, FL 33154

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

9801 Collins Ave. Suite 5i

Bal Harbour, FL 33154

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:

Enter Florida street address

Florida

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

MGR = Manager

AMBR = Authorized Member


<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Robert Marlin	9801 Collins Ave. Suite 5i	<input checked="" type="checkbox"/> Add
		Bal Harbour, FL 33154	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Robert Marlin	9801 Collins Ave, Suite 5i	<input checked="" type="checkbox"/> Add
		Bal Harbour, FL 33154	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
CHMN	Robert Marlin	9801 Collins Ave, Suite 5i	<input checked="" type="checkbox"/> Add
		Bal Harbour, FL 33154	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Chris Gleason	2655 1st Street, Suite 250	<input type="checkbox"/> Add
		Simi Valley, CA 93065	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.


Signature of a member or authorized representative of a member

Typed or printed name of signee