

U2000120263

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(Business Entity Name)

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13 JUN - 7 AM 11:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUN 10 2013
D. BUTLER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT:

B.R.A.G. 6, 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:

MIKE TAYLOR

Name of Person

N/A

Firm/Company

4707 POMPAHO RD.

Address

VENICE, FLORIDA 34293

City/State and Zip Code

INFO.MIKETAYLOR@GMAIL.COM

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

For further information concerning this matter, please call:

MIKE TAYLOR

Name of Person

at (941) 544-7521

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

FILED
13 JUN -7 AM 11:00
TALLAHASSEE, FLORIDA

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

B.R.A.G. 6, "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 09/20/2012 and assigned
Florida document number L12000120263

This amendment is submitted to amend the following:

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

MCCP ENTERPRISES "LLC"

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:

(Principal office address MUST BE A STREET ADDRESS)

4707 POMPADOR RD.

VENICE, FLORIDA

34293

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

4707 POMPADOR RD

VENICE, FL

34293

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:

MICHAEL TAYLOR

New Registered Office Address:

4707 POMPADOR RD.

Enter Florida street address

VENICE

City

, Florida

34293

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.

Michael Taylor
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>
MGRM	PARDO, MALE	25223 PUERTA DRIVE PUNTA GORDA, FL 33955	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	BECHT, PETER	13295 COLUCCIO ST. VENICE, FL 34293	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	STUART, CARL	1962 SETTLEMENT RD VENICE, FL 34285	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	TAILOR, MICHAEL	4707 POMERO RD VENICE, FL 34293	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	HALLAM, RONALD D.	8286 SHADOW PINE SHADOW WAY SANASOTA, FL 34238	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	SEDORE, JAMES P.	13182 HUGATA ST. VENICE, FL 34223	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove

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

Dated 05/30/2013,


Signature of a member or authorized representative of a member

MICHAEL TAYLOR
Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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CLERK OF STATE
TALLAHASSEE, FLORIDA