Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H13000234306 3)))



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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255

Phone : (305) 634~3694 : (305)633~9696 Fax Number

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MAGIC CITY REALTORS, LLC

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Certificate of Status	0	
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Estimated Charge	\$25.00	

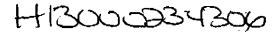
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Electronic Filing Menu Corporate Filing Menu

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10/22/2013





COVER LETTER

TO:

Registration Section Division of Corporations

MAGIC CITY REALTORS, 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:

Gryska Arguello

Name of Person

Thomas G. Sherman, P.A.

Firm/Company

90 Almeria Avenue

Coral Gables, FL 33134

City/State and Zip Code

Gryska@uniontitleservices.com

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

For further information concerning this matter, please call:

Gryska Sotolongo

at (305) 448-5898 ext. 204

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

\$25.00 Filing Foo

□\$30.00 Filing Fee & Certificate of Status □555.00 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 Tallahassec, 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

Magic City Realtors, LLC		
	ompany as it now appears on our records.) mited Liability Company)	
The Articles of Organization for this Limited Liability Cor Florida document number L13000141685		and assigned
This amondment is submitted to amend the following:	•	
A. If amending name, enter the new name of the limit	ed liability company here:	2018 OC
The new name must be distinguishable and end with the words "L.L.C."	"Limited Liability Company," the designation	"LLC" or the abbreviation
Enter new principal offices address, if applicable:	·	₩. P
(Principal office address MUST BE A STREET ADDRE	(2.5)	<u> </u>
•		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
	,	,
B. If amending the registered agent and/or registered agent and/or the new registered office addresses		the name of the new
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 a the provisions of all statutes relative to the proper and accept the obligations of my position as registered age being filed to merely reflect a change in the registered company has been notified in writing of this change.	l complete performance of my duties, and . ent as provided for in Chapter 608, F.S. O	I am familiar with and Ir, if this document is
	If Changing Registered Agent, Signature of New	Registered Agent

Page 1 of 3

PAGE 03/05

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>	Name	Address	Type of Action
MGRM	Carol Housen	7330 Ocean Terrace	Add
		Unit # 2001	Remove
		Miami Beach, FL 33141	_ = 2
MGRM	Carol Housen, P.A	7330 Ocean Terrace	
		Unit # 201	Remove
		Miami Beach, FL 33141	
			Add
			Remove
			_
			Add
			Remove
			_
			Add
,			Remove
			_
			Add
			Remove
			_

Page 2 of 3

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D. If amending a	nny other information, enter change(s) here: (Attach additional sheets, if nece	ustary.)
	Λ.	
Dated Octob	per 15 2013	
Dated OCIO	Signature of a member of authorized representative of a member	
The	omas G. Sherman, Esq. 🚶	
	Typed or printed name of signee	7.5
A	Page 3 of 3	2013 31.00 31.00
·	Filing Fee: \$25.00	2013 067 22 PM 1: 17