## 114000105778

(Re	equestor's Name)	
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## **COVER LETTER**

	Registration Sec Division of Corp	
CUBIEC	MGM DELI	RAY LLC
SUBJEC	.1;	Name of Limited Liability Company
The encle	osed Articles of A	Amendment and fee(s) are submitted for filing.
Please re	turn all correspor	dence concerning this matter to the following:
		JENNY C. PETRI
		Name of Person
		one management, inc.
		Firm/Company
		4700 HOMEWOOD COURT, SUITE 220
		Address
		RALEIGH, NC 27609
		City/State and Zip Code
		JPETRI@ONEFIC.COM
		E-mail address: (to be used for future annual report notification)
For furth	er information co	oncerning this matter, please call:
JENNY	C. PETRI	Person Area Code Daytime Telephone Number
	Name of	Person Area Code Daytime Telephone Number
Enclosed	l is a check for th	e following amount:
\$25.	00 Filing Fee	□ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee,  Certificate of Status  Certified Copy (additional copy is enclosed)  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

MGM DELRAY LLC					
(Name of the Limited Liability Comp (A Florida Limited	nany as it now appears on of Liability Company)	our records.)			
The Articles of Organization for this Limited Liability Compan Florida document number L14000105778	y were filed on JULY 2,	, 2014	and assign	ned	
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited lia	bility company here:				
The new name must be distinguishable and contain the words "Limited Liab	oility Company," the designs	ntion "LLC" or the abbrev	iation "L.L.C	C.*'	
Enter new principal offices address, if applicable:					
(Principal office address MUST BE A STREET ADDRESS)				<del></del>	
			- <del></del>	<del></del>	
			_		
Enter new mailing address, if applicable:	······································		· · · · · · · · · · · · · · · · · · ·		
(Mailing address MAY BE A POST OFFICE BOX)	<del></del>			<del></del>	
			7.		
			05 y	. 22	
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 he	<u>ere</u> :		775	O:	
			<b>9</b> 55	9	
Name of New Registered Agent:			<u> </u>	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
New Registered Office Address:					
	Enter Florida st	reet address			
		, Florida			
<del></del>	City		Zip Code		
New Registered Agent's Signature, if changing Registered Agen	<u>t:</u>				
I hereby accept the appointment as registered agent and ag provisions of all statutes relative to the proper and complete					

If Changing Registered Agent, Signature of New Registered Agent

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 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

Title Name <u>Address</u> Type of Action SOUTHCOAST PARTNERS LLC MGR 75 NE 6TH AVE, SUITE 106 **■** Add DELRAY BEACH, FL 33483 ☐ Remove ☐ Change \_ Add ☐ Remove ☐ Change □ Add □ Remove \_□ Change □ Add , ☐ Remove ☐ Change □ Add □ Remove \_□ Change □ Add ☐ Remove ☐ Change

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ffective date, if other than the date of an effective date is listed, the date must be speci tote: If the date inserted in this block does ocument's effective date on the Department	ific and cannot be prior to s not meet the applical	o date of filing or more than ble statutory filing requi	(optional) 90 days after filing.) Pur rements, this date will	suant to 605.020 not be listed a	17 (3) s the
e record specifies a delayed effect The 90th day after the record is t	tive date, but not filed.	an effective time,	at 12:01 a.m. on	the earlier o	of:
ated JANUARY 14	2016	<del></del> .			
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Filing Fee: \$25.00