## L14000/49849

(Re	questor's Name)	
(Ad	dress)	
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(Do	cument Number)	
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JALLAHASSEE, FLORIDA

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,	C	ORPORATI	When yo	ou need ACCESS to the world
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			7	WALK IN
			PICK UP:	11-24-14
		CERTIFIE	D COPY	······································
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	À	FILING	<u> </u>	LLC Amend
1.		Magic (CORPORATE NA	ME AND DOCUMENT #)	
2.		(CORPORATE NA	ME AND DOCUMENT #)	
3.		(CORPORATE NA	ME AND DOCUMENT #)	
4.		(CORPORATE NA	ME AND DOCUMENT #)	
5.		(CORPORATE NA	ME AND DOCUMENT #)	
6.		(CORPORATE NA	ME AND DOCUMENT #)	
SP	ECIA	L INSTRUCTIO	NS:	

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MAGIC KOY, LLC	_		TAS T	
(Name of the Lim	ited Liability Co (A Florida Limi	mpany as it now appears on our records.) ited Liability Company)	14 NOV SECRET	
The Articles of Organization for this Limited I	Liability Comp	any were filed on 09/24/14	and assigned	e production of the last of th
Florida document number L14000149849			平 里	
This amendment is submitted to amend the fol	lowing:		7: 48 STATE FLORID	C
A. If amending name, enter the new name	of the limited l	liability company here:	DA DA	
N/A				
The new name must be distinguishable and end with the	words "Limited	Liability Company," the designation "LLC" or th	e abbreviation "L.L.C."	-
Enter new principal offices address, if appli	cable:	N/A		_
(Principal office address MUST BE A STRE	ET ADDRESS	5)	·	_
				_
Enter new mailing address, if applicable:		N/A		_
(Mailing address MAY BE A POST OFFICE	(BOX)			_
				_
B. If amending the registered agent and			er the name of the	new
registered agent and/or the new registered of	mice address	nere:		
Name of New Registered Agent:	N/A		·· <u> </u>	
New Registered Office Address:				_
<del></del>		Enter Florida street address	_	
		, Florida		_
•		Citv	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 the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	ALAN CHAMO	480 NE 30 STREET UNIT 2107	■ Add
		MIAMI, FL 33137	□ Remove
			Add
			Remove
			Remove
			□ Remove
			TARAGE TO NO.
-			HASSEE, FLORE
			□ Remove

N/A	
Effective date, if other than the date of filin (The effective date must be specific, cannot be prior to do the date this document is filed by the Florida Department	ate of receipt or filed date and cannot be more than 90 days after
Dated NOVEMBER 24	, 2014
Jerlie alan	124
	member or authorized representative of a member
Signature of a	attenuer or admorazed representative of a member
Signature of a LESLIE ALAN ROZENCWA	,

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