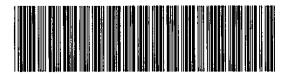
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(Re	equestor's Name)
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COVER LETTER

	ration Section of Corpo			
SUBJECT:	MAC	SANFORD 46, LLC		
		Name of Limi	ted Liability Company	
The enclosed Ar	ticles of An	nendment and fee(s) are subr	nitted for filing.	
Please return all	correspond	ence concerning this matter t	to the following:	
		Louis A. Sousa, Esq.		
			Name of Person	
		Lisa & Sousa, Ltd.		
			Firm/Company	
		5 Benefit Street		
			Address	
		Providence, RI 02904		
			City/State and Zip Code	
		n/a	·	
		E-mail address: (to be used for future annual report notificat	tion)
For further info	rmation con	cerning this matter, please ca	all:	
Diane R. Protar	10		401 274-0600 at ()	
	Name of P	erson		elephone Number
Enclosed is a ch	eck for the	following amount:		
□ \$25.00 Filir	ng 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

MAC SANFORD 46, LLC			
(Name of the Limited Liability Co (A Florida Limi	mpany as it now appears on o ted Liability Company)	our records.)	
The Articles of Organization for this Limited Liability Comp	any were filed on September 1	ber 16, 2015	and assigned
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 L	iability Company," the designation	ation "LLC" or the abb	previation "L.L.C."
Enter new principal offices address, if applicable:			
Principal office address MUST BE A STREET ADDRESS	<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		r records, enter	the name of the n
registered agent and/or the new registered office address	<u>here</u> :		ĭ.S
Name of New Registered Agent:			15 0 ECR
New Registered Office Address:			012 1741
Thew Registered Office Address.	Enter Florida si	treet address	THE D
		, Florida	77 5 11
New Registered Agent's Signature, if changing Registered Ag	City		SEP Code
New Registered Agent's Signature, it changing Registered Ag			≶

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>	Address	Type of Action
MGR	Carlos Ribeiro	2660 South Ocean Boulevard	Add
		Unit #706S	□ Remove
		Palm Beach, FL 33480	☐ Change
MGR	Diane Cavallo	2660 South Ocean Boulevard	Add
		Unit #706S	☐ Remove
		Palm Beach, FL 33480	☐ Change
MGR	Michael Cavallo	2660 South Ocean Boulevard	Add
		Unit #706S	Remove
		Palm Beach, FL 33480	☐ Change
MGR	Tanya DaCosta	2660 South Ocean Boulevard	≨ Add
<u> </u>		Unit #706S	15 OR Reference
		Palm Beach, FL 33480	7AR.)
MGR	Christopher DaCosta	Unit #706S Palm Beach, FL 33480 2660 South Ocean Boulevard Unit #706S Palm Beach, FL 33480 2660 South Ocean Boulevard Unit #706S Palm Beach, FL 33480 Costa Costa 2660 South Ocean Boulevard Unit #706S Palm Beach, FL 33480	Change I
		Unit #706S	□ Remove
		Palm Beach, FL 33480	☐ Change
MGR	Lindsey DiPietro	2660 South Ocean Boulevard	■ Add
		Unit #706S	☐ Remove
		Palm Beach, FL 33480	☐ Change

(continued)

MGR Alexander DiPietro 2660 South Ocean Boulevard Unit #706S
Palm Beach, FL 33480

15 OCT 23 AM IO: LO
SECRETARY OF STATE

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fective date, if other than then the confective date is listed, the date m	e date of filing:	nt he prior to date of	filing or more than 90 a	_ (optional)	Pursuant to 60	5 02
ote: If the date inserted in this becament's effective date on the l	lock does not meet th	ne applicable statu				
record specifies a delaye The 90th day after the re		but not an eff	ective time, at 1	.2:01 a.m. (onthe early OCT	7
October 23	201	15			SEN	
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00