

L15000157952

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

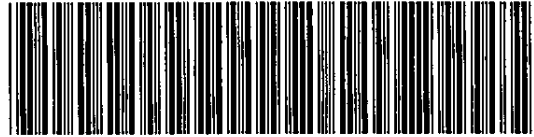
(Business Entity Name)

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TALLAHASSEE, FLORIDA

OCT 26 2015

J SHIVERS

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: MAC COLLEGIATE, 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:

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 notification)

For further information concerning this matter, please call:

Diane R. Protano at (401) 274-0600
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|---|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input checked="" type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

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>	<u>Address</u>	<u>Type of Action</u>
MGR	<u>Carlos Ribeiro</u>	<u>2660 South Ocean Boulevard</u>	<input checked="" type="checkbox"/> Add
		<u>Unit #706S</u>	<input type="checkbox"/> Remove
		<u>Palm Beach, FL 33480</u>	<input type="checkbox"/> Change
MGR	<u>Diane Cavallo</u>	<u>2660 South Ocean Boulevard</u>	<input checked="" type="checkbox"/> Add
		<u>Unit #706S</u>	<input type="checkbox"/> Remove
		<u>Palm Beach, FL 33480</u>	<input type="checkbox"/> Change
MGR	<u>Michael Cavallo</u>	<u>2660 South Ocean Boulevard</u>	<input checked="" type="checkbox"/> Add
		<u>Unit #706S</u>	<input type="checkbox"/> Remove
		<u>Palm Beach, FL 33480</u>	<input type="checkbox"/> Change
MGR	<u>Tanya DaCosta</u>	<u>2660 South Ocean Boulevard</u>	<input checked="" type="checkbox"/> Add
		<u>Unit #706S</u>	<input type="checkbox"/> Remove
		<u>Palm Beach, FL 33480</u>	<input type="checkbox"/> Change
MGR	<u>Christopher DaCosta</u>	<u>2660 South Ocean Boulevard</u>	<input checked="" type="checkbox"/> Add
		<u>Unit #706S</u>	<input type="checkbox"/> Remove
		<u>Palm Beach, FL 33480</u>	<input type="checkbox"/> Change
MGR	<u>Lindsey DiPietro</u>	<u>2660 South Ocean Boulevard</u>	<input checked="" type="checkbox"/> Add
		<u>Unit #706S</u>	<input type="checkbox"/> Remove
		<u>Palm Beach, FL 33480</u>	<input type="checkbox"/> Change

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(continued)

<u>TITLE</u>	<u>NAME</u>	<u>ADDRESS</u>	<u>ACTION</u>
MGR	Alexander DiPietro	2660 South Ocean Boulevard Unit #706S Palm Beach, FL 33480	Add

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

Multiple horizontal lines for amending information.

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. the earlier of:
(b) The 90th day after the record is filed.

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Dated October 23, 2015

Carlos P. Andrade

Signature of a member or authorized representative of a member

Carlos P. Andrade, Manager

Typed or printed name of signee