## L15000157852

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## **COVER LETTER**

TO: Regist Divisio	ration Sector of Corp	tion orations		
SUBJECT:	MAC	COLLEGIATE, LLC		
		Name of Lim	ited Liability Company	
The enclosed A	rticles of A	mendment and fee(s) are sub-	mitted for filing.	
Please return al	l correspon	dence 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		
		<del></del>	City/State and Zip Code	
		n/a		
For further info	rmation co	e-man address: (	to be used for future annual report notifiall:	ication)
Diane R. Prota	no		401 274-0600 at ( )	
	Name of	Person		: Telephone Number
Enclosed is a cl	neck for the	following amount:		
□ \$25.00 Filin	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:

TO:

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 COLLEGIATE, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on September 16, 2015 and assigned L15000157952 Florida document number 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 Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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 here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida 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 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>	Name	Address	Type of Action
MGR	Carlos Ribeiro	2660 South Ocean Boulevard	
		Unit #706S	□ Remove
		Palm Beach, FL 33480	Change
MGR	Diane Cavallo	2660 South Ocean Boulevard	<b>■</b> Add
		Unit #706S	☐ Remove
		Palm Beach, FL 33480	
MGR	Michael Cavallo	2660 South Ocean Boulevard	<b>₽</b> Add
		Unit #706S	☐ Remove
MGR		Palm Beach, FL 33480	☐ Change
	Tanya DaCosta	2660 South Ocean Boulevard	=1 ■ Add
		Unit #706S	SECHE Remove
		Palm Beach, FL 33480	ASSET D Change
MGR	Christopher DaCosta	2660 South Ocean Boulevard	
<del></del>		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)

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

15 OCT 23 AM IO: 55 SECRETARY OF STATE

amending any other informa				·
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ective date, if other than the n effective date is listed, the date muster. If the date inserted in this blowment's effective date on the D	st be specific and cannot be prior to ock does not meet the applica	to date of filing or more the	irements, this date	Pursuant 6605.02
				STEO A
record specifies a delayed The 90th day after the rec	d effective date, but not ord is filed.	an effective time,	at 12:01 a.m. ç	The Earlier
October 23	2015	<u></u> .		
	00.0	_ 		
	Signature of a member or author	rized representative of a n	nember	<del></del>

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Typed or printed name of signee

Filing Fee: \$25.00