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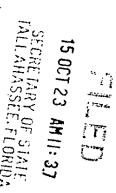
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| PICK-UP                 | TIAW                | MAIL        |
| (Bi                     | usiness Entity Nar  | me)         |
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| Certified Copies        | Certificates        | s of Status |
| Special Instructions to | Filing Officer:     |             |
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(A PROFESSIONAL CORPORATION)

5 Benefit Street Providence, Rhode Island 02904 Telephone (401) 274-0600 Facsimile (401) 421-6117 Carl B. Lisa Louis A. Sousa \* Carl B. Lisa, Jr. \* Sandra Sousa-Marujo \* John J. Poloski, III \* Christopher J. Anasoulis \*

Robert G. Branca, Jr. \* † Eugene A. Amelio \* of Counsel

\* (Also Member of Massachusetts Bar) † (Also Member of District of Columbia Bar)

October 20, 2015

Florida Department of State Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 323101

RE: MAC 1418 Semoran, LLC et al

Our File #16546

To Whom It May Concern:

Enclosed please find Articles of Amendment and \$55.00 filing fee check for each of the following entities. Please file the same and provide this office with a certified copy.

MAC 1418 SEMORAN, LLC MAC 436 ALTAMONTE, LLC

MAC ALOMA, LLC

MAC ALTAMONTE, LLC

MAC ALTAMONTE MART, LLC

MAC APOPKA, LLC MAC BLUE HERON, LLC

MAC BROWNWOOD, LLC

MAC BRUSTERS, LLC

MAC CASSELBERRY, LLC

MAC COLLEGIATE, LLC MAC COLONIAL, LLC

MAC CONWAY, LLC

MAC DOGTRACK LONGWOOD, LLC

MAC EDGEWATER, LLC

MAC EUSTIS, LLC

MAC FERN PARK, LLC

MAC INTERNATIONAL, LLC

MAC LAKE MARY, LLC

MAC LEESBURG LAKE SQUARE, LLC

MAC LEESBURG PALM PLAZA, LLC

MAC LONGWOOD, LLC

MAC LONGWOOD 1792, LLC

MAC MICHIGAN, LLC

MAC NARCOOSSEE, LLC

MAC NORTH ORANGE AVE, LLC

MAC OBT, LLC

MAC ORANGE AVENUE, LLC

MAC ORANGE CITY, LLC

MAC OVIEDO, LLC

MAC ROSEMONT, LLC

MAC SANFORD 46, LLC

MAC SANFORD OD, LLC

MAC SEMORAN, LLC

MAC SOUTH ORANGE AVE, LLC

MAC SPANISH SPRINGS, LLC

MAC STEAKHOUSE, LLC

MAC SYMPHONY, LLC

MAC TAVARES, LLC

WAC TAVARES, LLC

MAC UNIVERSITY, LLC

MAC VILLAGES 441, LLC

MAC VILLAGES WEST, LLC

MAC WEST COLONIAL, LLC

MAC ORLANDO HOLDINGS, LLC

AMCD REALTY, LLC

Page Two

Thank you.

Very truly yours,

LISA & SOUSA, LTD.

Louis A. Sousa

Enclosure LAS:drp

FEDERAL EXPRESS

## **COVER LETTER**

Registration Section.
Division of Corporations

Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314

TO:

| SUBJE <i>C</i> T:MAG        | C 1418 SEMORAN, LLC                          |  |  |
|-----------------------------|--|--|--|
| 30bjec1:                    | Name of Limi                                 | ted Liability Company  |  |
| The enclosed Articles of    | Amendment and fee(s) are subr                | nitted for filing.   |  |
| Please return all correspo  | ndence 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                         |  |  |
|                             | n/a  | City/State and Zip Code  |  |
|                             |  | to be used for future annual report notifi                       | cation)  |
| For further information c   | oncerning this matter, please ca             | ıll:   |  |
| Diane R. Protano            |  | 401 274-0600<br>at ()  |  |
| Name o                      | f Person                                     |  | Telephone Number   |
| Enclosed is a check for the | ne following amount:                         |  |  |
| □ \$25.00 Filing Fee        | □ \$30.00 Filing Fee & Certificate of Status | S55.00 Filing Fee & Certified Copy (additional copy is enclosed) | ☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
|                             | ING ADDRESS: ration Section                  | STREET/COURIE<br>Registration Section                            |  |

Division of Corporations

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| y as it now appears on our records<br>ability Company) | <u>s.</u> )                             |
|--|---|
| vere filed on September 16, 20                         | and assigned                            |
|  |   |
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| ity company here:                                      |   |
| y Company," the designation "LLC                       | " or the abbraviation "L.L.C."          |
|  | 5 0<br>                                 |
|  | # <u>P</u> 9                            |
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| ice address on our records                             | s, enter the name of the                |
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| Enter Florida street addres                            | :s                                      |
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| City   | Zip Code                                |
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| e to act in this capacity. I fu                        | rther agree to comply with              |
|  | Enter Florida street addres  City  City |

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 |                |
|              |                     | Unit #706S                 | Remove         |
|              |                     | Palm Beach, FL 33480       | □ Change       |
| MGR          | Michael Cavallo     | 2660 South Ocean Boulevard | ≥ <b>■</b> Add |
| MGR          | Tanya DaCosta       | Unit #706S                 | 5 0<br>CR Re.  |
|              |                     | Palm Beach, FL 33480       | SSEE Change    |
|              |                     | 2660 South Ocean Boulevard | FLOR Add       |
|              |                     | Unit #706S                 | □ Remove       |
|              |                     | Palm Beach, FL 33480       | Change         |
| MGR          | Christopher DaCosta | 2660 South Ocean Boulevard | B Add          |
|              |                     | 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 NAME ADDRESS ACTION

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

15 OCT 23 AM II: 87
SECRETARY OF STATE

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| oativa data ifatha                              | n than the data of                       | filings                               |  | (0)                   | otional)           |             |
| ective date, if other                           | the date must be specif                  | fic and cannot be price               |  | r more than 90 days a |                    |             |
| te: If the date inserte<br>ument's effective da |  |                                       |  | ling requirements,    | this date will not | t be listed |
|   |  |                                       |  |                       |                    |             |
| record specifies<br>he 90th day afte            | a delayed effecti<br>er the record is fi | ive date, but n<br>iled.              | ot an effectiv                               | e time, at 12:0       | 1 a.m. on the      | earlier     |
| ed  |  | 2015                                  | ·  |                       |                    |             |
|   |  | 1                                     |  |                       |                    |             |

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00