

L16000000856

(Requestor's Name)

(Address)

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16 APR - 8 PM 3:50
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OF THE STATE OF LOUISIANA

APR 12 2016

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MACAGW 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:

ADAM WELDEN
Name of Person
MACAGW LLC
Firm/Company
4611 Okeechobee Blvd Unit 114
Address
West Palm Beach FL 33417
City/State and Zip Code
adamwelden@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Adam Welden at (330) 413-3343
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- ☐ \$25.00 Filing 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**

MACAGW 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 12/30/2015 and assigned Florida document number L160000000856

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 "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

4611 Okeechobee Blvd
West Palm Beach FL 33417

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

4611 Okeechobee Blvd
West Palm Beach FL 33417

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:

Faith Bradshaw

New Registered Office Address:

4611 Okeechobee Blvd Unit 114
Enter Florida street address

West Palm Beach, Florida 33417
City 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

MGR = Manager
AMBR = Authorized Member

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- ☐ Add
- ☐ Remove
- ☐ Change
- ☐ Add

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

1) Adding Faith Bradshaw as authorized member at 25%

2) changing address to 4611 Okeechobee Blvd/Unit 114 West Palm Beach FL 33417

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E. Effective date, if other than the date of filing: 4/4/16 (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. on the earlier of:

(b) The 90th day after the record is filed.

Dated

April 4th, 2016



Signature of a member or authorized representative of a member

ADAM WELDEN

Typed or printed name of signer