# 1/6000/50938

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SECRETARY OF STATE

ORE INSTOR STANS

K. SALY MAY 25 2017 CORPORATION SERVICE COMPANY
1201 Hays Street
Tallhassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195
REFERENCE : 656364 4

COST LIMIT : \$ 55.00

AUTHORIZATION

ORDER DATE: May 24, 2017

ORDER TIME: 12:49 PM

ORDER NO. : 656364-005

CUSTOMER NO: 4311863

### DOMESTIC AMENDMENT FILING

NAME: MAGIC MONEY, LLC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT
RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender -- EXT# 62956

EXAMINER'S INITIALS:

## **COVER LETTER**

Divi	sion of Corp	orations		
SUBJECT:	Magic Mone			
222201,			ited Liability Company	<del></del>
The enclosed	Articles of A	mendment and fee(s) are subr	mitted for filing.	
Please return	all correspon	dence concerning this matter t	to the following:	
		Ivy M. Shapiro, Paralegal		
			Name of Person	
		Blank Rome LLP		
			Firm/Company	
		One Logan Square		
			Address	
		Philadelphia, PA 19103		
			City/State and Zip Code	
		Brett@magicmoney.com		
		E-mail address: (t	to be used for future annual report notific	ation)
For further in	formation co	ncerning this matter, please ca	all:	
Ivy M. Shap	iro		215 569-5784 at ()	
	Name of	Person	Area Code Daytime	Telephone Number
Enclosed is a	check for the	following amount:		
□ \$25.00 F	iling Fee	☐ \$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fce & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

TO:

**Registration Section** 

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

FILED
2017 MAY 24 AM 8: 21
SECRETARY OF STATE

MAGIC MONEY 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 \_\_\_\_\_\_08/11/2016 and assigned Florida document number L16000150938 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The name of the limited liability company is Magic Money Holdings, LLC 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) 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 , Fiorida \_

### 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 2017 MAY 24 AM 8: 21 AMBR = Authorized Member SECRETARY OF STATE TALLAHASSEE, FLORIDA Address **Title** Name Type of Action □ Add ☐ Remove \_□ Change □ Add ☐ Remove \_□ Change \_□ Add □ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add □ Remove ☐ Change ☐ Remove

□ Change

	FILE L	r,
	2017 May	<i>.</i>
	TOTT HAT 24 AM (	8: 2
	SECRETARY OF ST. FALLAHASSEE. FLO	ΑΤΕ
		RIŌA
····		
Note: If the date inserted in t	the date of filing:  must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.02 is block does not meet the applicable statutory filing requirements, this date will not be listed as a Department of State's records.	:07 (3)( as the
he record specifies a del The 90th day after the	yed effective date, but not an effective time, at $12:01\ a.m.$ on the earlier record is filed.	of:
Dated May 19	2017	
	renature of a member or authorized representative of a member	
	<i>'</i> /	

Page 3 of 3

Filing Fee: \$25.00