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2024 AUG 27 PM 4: 28 SECRETARY OF STATE

COVER LETTER

TO: Registration Division of C				
SUBJECT: Magic C	ompanies Group, LLC			
	Name of Lin	nited Liability Company		_
The enclosed Articles	of Amendment and fee(s) are sub	omitted for filing.		
Please return all corres	pondence concerning this matter	to the following:		
	Hector Lizasuain			
		Name of Person		
	Magic Companies Group.	LLC		
		Firm/Company		
	1170 Celebration Blvd. su	Address		
		7.447.655		
	Celebration, FL 34747			
		City/State and Zip Code		27
	nayara.longaray@magiccor			ZI, I
	E-mail address: (to be used for future annual rep	oort notification)	2024 AUG 27 SECRETAR TALLAH
For further information	concerning this matter, please c	all:		27 EAR
Hector Lizasuain		at (407) 4037	414	ARY OF STARTSEE, INDEED, INDEE
	of Person		Daytime Telephone Nun	
				E 29
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 enclos	Certi: ed) Certii	0 Filing Fee, ficate of Status & fied Copy lonal copy is enclosed)
Mailing Addr Registration Division of P.O. Box 63 Tallahassee	Section Corporations 327	Division of The Centre	ress: on Section of Corporations re of Tallahassec Monroe Street, Suit	e 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Com (A Florida Limite	npany as it now appears on our records.) d Liability Company)	
The Articles of Organization for this Limited Liability Compartion $\frac{1.17000112043}{1.000112043}$.	ny were filed on <u>05/22/2017</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	ability company here:	
The new name must be distinguishable and contain the words "Limited Lia	ability 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 offic agent and/or the new registered office address here:	e address on our records, <u>enter the</u>	SECRETARY OF Scinewings TALLAHASSEE Hame of L
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florid	
	City	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

MAGIC COMPANIES GROUP LLC

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
CEO	HECTOR LIZASUAIN	1170 CELEBRATION BLVD STE 106, CELEBRA	<u>ATB</u> ≣Add
			□Remove
			Change
			□Add
			□Remove
		SECRETAKT OF STATE	E T
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Please update Hector Lizasuain information. Hector Lizasuain is the CEO, not a member of the company. E. Effective date, if other than the date of filing: 08/19/2024 (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 August 19 HECTOR LIZASUAIN

Typed or printed name of signee