L17000130047

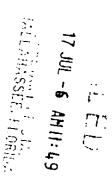
	(Requestor's Name)
	(Address)
(Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Elling Officer	
PICK-U	P WAIT MAIL
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Office Use Only



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COVER LETTER

TO:	Registration Sec Division of Cor			
SUBJEC	MGG REAL	LY LLC		
SUBJEC	- I 1	Name of Limi	ited Liability Company	
The encl	osed Articles of	Amendment and fec(s) are sub	mitted for filing.	
Please 10	tuin all correspo	ndence concerning this matter	to the following:	
		MICHAEL A GIORDANG) JR	
			Name of Person	
		MICHAEL ANTHONY G	IORDANO JR LLC	
			Firm/Company	
		20 W LUCERNE CR # 51.	2	
			Address	
		ORLANDO, FL. 32801		
			City/State and Zip Code	
		BIGMIKETHEREALTOR		
			to be used for future annual report notifi	cation)
For furth	ner information c	oncerning this matter, please co	all:	
MILLICENT KUHANECK		CK	386 761-8786	
	Name o	f Person	at () Area Code Daytime	Telephone Number
Enclose	d is a check for th	he 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 Taliahassee, 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

MCC PRAITY LLC

(Name of the Limited Liability Compa (A Florida Limited	iny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L17000130047		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
MICHAEL ANTHONY GIORDANO JR ELC		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable:	20 W LUCERNE CR # 512	
Principal office address MUST BE A STREET ADDRESS)	ORLANDO, FL. 32801	
Enter new mailing address, if applicable:	20 W LUCERNE CR # 512	
Mailing address MAY BE A POST OFFICE BOX)	ORLANDO, FL. 32801	
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her Name of New Registered Agent:		the name of the
New Registered Office Address:	Enter Florida street address	SS YEAR
	Florida	A A
	City	08.49 CO
New Registered Agent's Signature, if changing Registered Agent:	Ĺ	9.

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 = M $AMBR = A$	lanager uthorized Member		
<u>Title</u>	Name	Address	Type of Action
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			Change
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ective date, if other than the effective date is listed, the date must e: If the date inserted in this bloament's effective date on the De	ock does not meet the a	pplicable statutory i	(opti or more than 90 days after iling requirements, thi	onal) r filing.) Pursuant s date will not b	to 605.03 c listed
record specifies a delayed he 90th day after the reco	effective date, buord is filed.	t not an effectiv	e time, at 12:01 a	a.m. on the e	earlier
ed JUNE 28	2017	7			
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Page 3 of 3

Filing Fee: \$25.00