118000051894

(Red	questor's Name)	
(Add	fress)	
(Add	lress)	
(City	//State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nan	ne)
(Doc	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer:	

Office Use Only

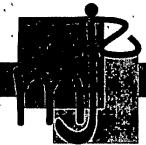


600312547376

04/30/18--01033--028 **60.00



HARRIS



Maceda Johnson Law, Pllc.

VIA U.S. POSTAL SERVICES

April 26, 2018

Florida Department of State Division of Corporations - Registration Section P.O. Box 6327 Tallahassee, FL 32314

RE: Amended to Articles of Organization of Maceda Johnson Law, PLL

To whom may it concern,

Attached to this letter, please find the amended Articles of Organization for Maceda Johnson Law, PLLC, identified under assigned Florida Document Number L18000051894. The purpose of the amendment is to correct the correct principal address which is: <u>2550 NW 72nd</u> ave., Suite 213, Miami, FL 33122.

Enclosed please find the following documents:

- Articles of Amendment to Articles of Organization of Maceda Johnson Law, PLLC,
- A check of \$ 60 for the Filling Fee, Certificate of Status and Certified Copy

If you have any questions, please contact me.

Respectfully Submitted,

Fidel Guillermo Maceda-Johnson, Esq. Maceda Johnson Law, PLLC 2550 NW 72nd ave, Suite 213, Miami, FL 33122

Ph: (754) 308-7042

Email- fgmaceda@gmail.com

COVER LETTER

	Registration Sec Division of Corp			
CUDIEC		son Law, PLLC		
SUBJEC	1;	Name of Limi	ted Liability Company	
The enclo	osed Articles of A	mendment and fee(s) are subr	mitted for filing.	
Please ret	urn all correspon	dence concerning this matter t	to the following:	
		Fidel Guillermo Maceda-Jo	ohnson	
			Name of Person	
		Maceda Johnson Law, PLL	C	
			Firm/Company	
		5030 Sw 173rd way		
		-	Address	
		Southwest Ranches, FL 333	331	
			City/State and Zip Code	
		fgmaceda@gmail.com		
		·	o be used for future annual report notific	cation)
For further	er information co	ncerning this matter, please ca	ıll:	
Fidel Guillermo Maceda-johnson 754 2344077				
	Name of	Person	at () Area Code Daytime	Telephone Number
Enclosed	is a check for the	following amount:		
\$25.0	0 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**

Maceda Johnson Law, PLLC		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on <u>02/27/2018</u>	and assigned
Florida document number L18000051894		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	2550 NW 72nd ave., Suite 213	
(Principal office address MUST BE A STREET ADDRESS)	Miami, FL 33122	
		30
Enter new mailing address, if applicable:		171 A.D. Tomas
(Mailing address MAY BE A POST OFFICE BOX)		
		510
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		nter the name of the n
Name of New Registered Agent:		
New Registered Office Address:		·
	Enter Florida street address	
	, Florid	
	City	Zip Code

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** _□ Add □ Remove ☐ Chánge □ Add ☐ Remove □ Change _□ Add ☐ Remove ☐ Change _□ Add _□ Remove ☐ Add □ Remove ☐ Change

•	апу other informa	mon, enter cha	nge(s) here: (Attach additiona	l sheets, if necesso	ary.)	
							_
							_
							_
			 				_
							_
							_
							_
							_
					/		
							_
					-/	<u> </u>	
							_
				/			-
		 			<u>,</u>		<u>.</u>
							_
			•				_
		/	•				_
(If an effective d	te, if other than the late is listed, the date mus	: date of filing; st be specific and cr	annot be prior to c	late of filing or more	(optiona than 90 days after fili	a l) ng.) Pursuant to 60)5.0207 (3)(b)
Note: If the o	date inserted in this bl ffective date on the D	lock does not mee	et the applicable	e statutory filing re	equirements, this da	ite will not be lis	ted as the
document 5 c	nective date on the D	repartment of Sta	ie s records.				
the record s	pecifies a delayed	d effective da	te hut not a	n effective tim	e at 12:01 a m	on the earl	ier of:
	day after the rec		1	ii ciicciive tiiri	c, at 12.01 a	ii oii ciic cari	
		,	Λ			₩., M	
Dated		·\/,	<i>N</i>	•			,
		OK.	1 /1			18 3	entantes P D
		Signature Af A	Paber or authorize	ed representative of	a member	<u> </u>	-
		DIVIDALUIC BUR UII.					
_	1 -		10 <i>i</i>				direction.
_	Fidel Gu		10 <i>i</i>	Johnson	- MGR		

Page 3 of 3

Filing Fee: \$25.00