# L18000 140035

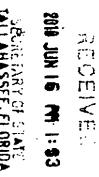
(Requestor's Name)
(Address)
(Address)
, ,
(City/State/Zip/Phone #)
(Otty/Otale/Zip/: Hone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



000314464040

08/15/18--01016--013 \*\*25.00



JUS 18/18

### **COVER LETTER**

TO: Registration Sec Division of Corp			
subject: The	magic pros	ServiceS LL	<u>C</u>
The enclosed Articles of A	amendment and fee(s) are sub-	mitted for filing.	
Please return all correspon	idence concerning this matter	to the following:	
	Calix G	Name of Person	<del></del>
		Firm/Company	
	4302 Holly	(Wad BIVD	Suite (10)
	Hollywood F	City/State and Zip Code	
	mrmagic 7540	a Yahoo corre	ication)
For further information co	ncerning this matter, please ca	all:	
Calix Green	Person	at ( <u>305</u> ) <u>76</u> (- Area Code Daytime	- 9383 Telephone Number
Enclosed is a check for the	e 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:

TO:

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

The magic Pros Ser	VICES, LLC	
(Name of the Limited Liability Compa- (A Florida Limited L	Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>LN800140025</u> .	were filed on _C C I8	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:	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or t	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 of registered agent and/or the new registered office address here	· —	nter the name of the nev
Name of New Registered Agent:		AHAS
New Registered Office Address:	<del></del>	SEC M
	Enter Florida street address Florid	TE T
<del></del>	City	Zip Tede
New Registered Agent's Signature, if changing Registered Agent:	•	
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete		

If Changing Registered Agent, Signature of New Registered Agent

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 amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager

AMBR = Au	thorized Member		
<u>Title</u>	Name	Address	Type of Action
AP	Callis Green	4302 Hollywood Blud #111	□ Add
		Holy wood Fla 33021	Remove
m6B owner	Calix Green	Hallywood Fla 33021	□ Change So;Ie I(O Add
		Hallywood Fla 33021	□ Remove
			Change
	<u></u>		Add
		<del></del>	□ Remove
		ALLAHASSEE	Change  Addi
		FLORIDA	Change
			□ Remove
			Change
			🗆 Add
			Remove
			☐ Change

<del>-</del>	
<del></del>	
	N IO
	3 5 m
	LORID.
	<del>Č</del>
· · · · · · · · · · · · · · · · · · ·	
Effective date, if other than the date of filing:  (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 Note: If the date inserted in this block does not meet the applicable statutory filing requiren document's effective date on the Department of State's records.	
the record specifies a delayed effective date, but not an effective time, at ) The 90th day after the record is filed.	12:01 a.m. on the earlier of:
Dated June 12 2018  Signature of a member or authorized representative of a member of a me	X Green
Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00