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OM GIGIRO

COVER LETTER

Registration Section
Division of Corporations

Tallahassee, FL 32314

TO:

MAD SUBJECT:	O Enterprises , LLC		
30BJEC1.	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Richard Dougherty		
		Name of Person	
	MADO Enterprises, ELC		
		Firm Company	
	17567 84th Court North		
		Address	
	Loxabatchee , FL 33470		
		City/State and Zip Code	
	madoenterprises@gmail.com		
	E-mail address: (to be used for future annual report not	ification)
For further information c	oncerning this matter, please c	all:	
Richard Dougherty		561 323-0844	
Name o	of Person	at ()	ne Telephone Number
Enclosed is a check for the	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)
<u>Mailing Addres</u> Registration S		Street Address: Registration Sc	netian
Division of C		Division of Co	
P.O. Box 632		The Centre of	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

MADO Enterprises, LLC			2020 MAY 1	28_AM_8: 29
(Name of the Limited)	Jability Compa	iny as it now appears on Liability Company)	i our records.)	
Articles of Organization for this Limited Liabi	lity Company	were filed on Augus	121, 2018 LLAHA	SEE, LLine and assigned
s amendment is submitted to amend the followi	սճ:			
If amending name, enter the new name of th	e limited liab	ility company here:		
new name must be distinguishable and contain the words	s "Limited Liabi	lity Company," the desig	nation "LLC" or the al	breviation "L.L.C."
er new principal offices address, if applicabl	e:	MADO Enterprises , LLC		
incipal office address MUST BE A STREET A		17567 84th Court	North	
		Loxahatchee, FL.	33470	
nter new mailing address, if applicable: <u>Auiling address MAY BE A POST OFFICE BOX)</u>		MADO Enterprises	s., LLC	
		17567 84th Court	North	
		Loxahatchee , FL .	33470	
If amending the registered agent and/or regisent and/or the new registered office address h Name of New Registered Agent:			rds, <u>enter the nan</u>	e of the new regist
				
New Registered Office Address:	17567 84th Co			
		Enter Florida :	street address	
Ĩ	oxahatehee	City	, Florida	3470 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.

of Changing Registered Agent, Squadire of New Registere

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

Title	Name	<u>Address</u>	Type of Action
AMBR	Christina Magliocco	10404 Oliver Lane	□Add
		Royal Palm Beach, FL 33411	■Remove
			□Change
MGR Ch	Christina Magliocco	10404 Oliver Lane	□Add
		Royal Palm Beach , FL 33411	■Remove
			☐Change
	****		🗆 🗆 🗆 🗆
			Remove
			☐Change
			□Add
			□Remove
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Note:	e date, if other than the date of filing:
he record ord is file	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 d.
Dated_	May 22
	Signature of a member or authorized representative of a member

Filing Fee: \$25.00