11900000 4455

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status

Special Instructions to Filing Officer:
1

Office Use Only



700323892597

01/30/19--01008--015 **25.00

13 JAN 30 A III ET

FEB 0 6 2019 T. LEMIEUX

COVER LETTER

TO:		tration Section of Corpo			e e			
	MAGARI INVESTMENT GROUP LLC							
Name of Limited Liability Company								
The end	closed a	Articles of A	mendment and fee(s) are sub-	mitted for filing.				
Please 1	return a	ll correspon	dence concerning this matter	to the following:				
			WALTER WAINSTEIN					
				Name of Person				
			WALTER WAINSTEIN, F	PA				
				Firm/Company				
				Address				
			HOLLYWOOD, FL 33024					
			E-mail address: (to be used for future annual report not	ification)			
For fur	ther int	ormation co	ncerning this matter, please ca	all:				
WALT	ER W	AINSTEIN		786 399-0460 at ()				
	-	Name of	Person	Area Code Daytin	ne Telephone Number			
Enclos	ed is a	check for the	: following amount:					
■ \$2:	5.00 Fi	ling 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

(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 Florida document number L19000004455	were filed on 01/02/2019	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:	2019 J.W
The new name must be distinguishable and contain the words "Limited Liabi	lity Company "the designation "LLC" or the	tar ++
The new name must be distinguishable and contain the words "Limited Liabi Enter new principal offices address, if applicable:	701 PROMENADE DR. STE 106	>
(Principal office address MUST BE A STREET ADDRESS)	PEMBROKE PINES, FL 33026	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	7401 PALOMINO DR APT 117 HOLLYWOOD, FL 33024	
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her	ffice address on our records, <u>ente</u>	r the name of the
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florida _	
	City	Zip Code

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

MACADI INIVICETMENT CROUD 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> WALTER WAINSTEIN	Address 7401 PALOMINO DR APT 117	Type of Action
MGR	WALTER WITHOUT TO	HOLLYWOOD, FL 33024	Add
			Remove
			☐ Change
MGR	PAOLINI, ANTONIO	7401 PALOMINO DR UNIT 117 DAVIE, FL 33024	
			■ Remove
			☐ Change
			□ Add
			☐ Remove
			Change
 			
			Remove
			Change
			Remove
			□ Change
			Add
			☐ Remove
			Change

· ·					
					
			·		
					.
			-		<u> </u>
					
					
					
ective date, if other than the effective date is listed, the date mus	date of filing:	prior to date of fi	ling or more than G	(optional)	erspant to 605 020
te: If the date inserted in this bl	ock does not meet the ap	pplicable statut	ory filing require	ments, this date wil	I not be listed as
tument's effective date on the D	epartment of State's reco	ords.			
record specifies a delayed he 90th day after the rec		t not an effe	ctive time, a	: 12:01 a.m. on	the earlier o
ne sour day after the rec	ord is filed.				
, JANUARY, 25TH	2019				
ed	1	 •			
10:					

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00