L20000240441

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COVER LETTER

TO: Registration Section **Division of Corporations** MAGL DJ LLC SUBJECT: ____ Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: ORTIZ, MARIA NATALIA Name of Person MAGI DJ LLC Firm/Company 7501 ETREASURE DR. SUITE 107 Address NORTH BAY VILLAGE, FL 33141 City/State and Zip Code natalia@costamiamihomes.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: ORTIZ, MARIA NATALIA 786 263-2609 Daytime Telephone Number Name of Person Area Code Enclosed is a check for the following amount: □ \$30.00 Filing Fee & **\$25.00** Filing Fee □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) (additional copy is enclosed)

Mailing Address:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address:

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MAGE DJ LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on _____ and assigned Florida document number _______L20000240441 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "L.L.C" or 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 office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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

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.

City

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>	<u>Address</u>	Type of Action
MGR, AMBR	ORTIZ, MARIA NATALIA	7501 E TREASURE DR 107 NORTH BAY VILLAGE, FL 33141	
			□Add
			🖃 Remove
			□Change
MGR	DIEGO ELIAS	7501 ETREASURE DR 107 NORTH BAY VILLAGE, FL 33141	_
			= Add
			□Remove
			□Change
MGR	JANETTE C CARULLO PEREIRA	7501 E TREASURE DR 107 NORTH BAY VILLAGE, FL 33141	
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ffective date, if other than th	May 18, 2021 e date of filing:	(optional)
an effective date is listed, the date m	ust be specific and cannot be prior to date of filing or n	nore than 90 days after filing.) Pursuant to 605.0207
ote: If the date inserted in this to coment's effective date on the l	plock does not meet the applicable statutory filin Department of State's records.	ng requirements, this date will not be listed as
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record specifies a delayed effect is filed.	ive date, but not an effective time, at 12:01 a.m.	on the earlier of: (b) The 90th day after the
14 10	2021	
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May 18 ated		
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	Signature of a member or authorized representative	e of a member