

3/10/2021

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

L21000079766

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : TAX, ACCOUNTING & FINANCIAL PRO, INC
Account Number : I20120000058
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Fax Number : (866)895-8710

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: epuka76@aol.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
MGC CAPITAL PARTNERS LLC

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March 9, 2021

FLORIDA DEPARTMENT OF STATE
Division of Corporations

MGC CAPITAL PARTNERS LLC
21055 NE 37TH AVE
APT 2707
AVENTURA, FL 33180US

SUBJECT: MGC CAPITAL PARTNERS LLC
REF: L21000079766

We have received your electronically transmitted document. However, the document was submitted under the wrong electronic filing type and cannot be processed by this office.

To proceed, you must abandon this filing and resubmit your filing under the appropriate electronic filing type.

The fax audit sheet submitted is for a LP/LLP (Limited Partnership). This company is an LLC (Limited Liability Company).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Karen A Saly
Regulatory Specialist II

FAX Aud. #: E21000090205
Letter Number: 621A00004942

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

MGC CAPITAL PARTNERS 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 02-16-2021 and assigned
Florida document number L21000079766.

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 "LLC" 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

Florida

City

Zip Code

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.

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>	<u>Address</u>	<u>Type of Action</u>
AMBR	MARIANA GARCIA CERVERA	21055 NE 37TH AVE	<input checked="" type="checkbox"/> Add
		APT 2707	<input type="checkbox"/> Remove
		AVENTURA, FL 33180	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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Dated MARCH 03, 2021

Signature of a member or authorized representative of a member

MARIA GARCIA CERVERA

Typed or printed name of signee