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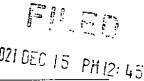
TO: Registration S Division of Co			
Magrans I SUBJECT:	.egal Group, PLLC	•	
		ited Liability Company	<del></del>
	f Amendment and fee(s) are sub condence concerning this matter	Ť	
	Tahimi Magrans		
		Name of Person	<del></del>
	Magrans Legal Group, PL	LC	
		Firm/Company	<del></del>
	3300 NE 192nd St Apt 10	12	
	<del></del>	Address	
	Aventura, FL 33180		
	tmagrans@gmail.com	City/State and Zip Code	
For further information	E-mail address: ( concerning this matter, please c	to be used for future annual report notif	fication)
	concerning this matter, please c		
Tahimi Magrans		305 9380236 at ()	
Name	of Person	Area Code Daytime	e Telephone Number
Enclosed is a check for t	the 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 tadditional 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**



Magrans Legal Group, PELC

	(A Florida Limited Liability Company)	Man Sanda and Albanda
The Articles of Organization for this Limited I	Liability Company were filed on 10/07/2021	and assigned
Florida document number L21000439275	·	
This amendment is submitted to amend the fol	lowing:	
A. If amending name, enter the new name of	of the limited liability company here:	
Magrans Law Firm , PLLC .		
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 appli	cable:	
(Principal office address MUST BE A STRE	ET ADDRESS)	
Enter new mailing address, if applicable:		
Enter new mailing address, if applicable:		
	= BOX)	
	<u>E BOX)</u>	
Enter new mailing address, if applicable: ( <u>Mailing address MAY BE A POST OFFICE</u>	E BOX)	
(Mailing address MAY BE A POST OFFICE  B. If amending the registered agent and/or	registered office address on our records, enter	the name of the new regi
(Mailing address MAY BE A POST OFFICE  B. If amending the registered agent and/or	registered office address on our records, enter	the name of the new regi
Mailing address MAY BE A POST OFFICE  B. If amending the registered agent and/or agent and/or the new registered office address	registered office address on our records, enter	the name of the new regi
Mailing address MAY BE A POST OFFICE  B. If amending the registered agent and/or agent and/or the new registered office address  Name of New Registered Agent:	registered office address on our records, <u>enteress here:</u> Ash Magrans	the name of the new regi
(Mailing address MAY BE A POST OFFICE  B. If amending the registered agent and/or agent and/or the new registered office address	registered office address on our records, <u>enter</u> ess here:	
(Mailing address MAY BE A POST OFFICE  B. If amending the registered agent and/or agent and/or the new registered office address  Name of New Registered Agent:	registered office address on our records, enteress here:  Ash Magrans  3300 NE 192nd ST Apt 1012  Enter Florida street address	

I hereby actent 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	Membe

<u>Title</u>	<u>Name</u>	Address	Type of Action
			🗆 Add
			□Remove
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			□Remove
			□Change

Iffective	date, if other than the date of filing: (optional)
f an effecti <u>Note:</u> - If :	ive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as it's effective date on the Department of State's records.
	pecifies 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 is filed.	12/09/21
d is filed.	1
d is filed.	1