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(Rec	questor's Name)	
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COVER LETTER

	ustration Se ision of Cor						
SUBJECT:		LTORS LLC					
SOBJECT		Name of Lim	ited Liability Company		•		
The enclosed	l Articles of	Amendment and feets) are sub	mitted for filing.				
Please return	all correspo	ndence concerning this matter	to the following:				
		ANDREŞ M. MAJERSKY					
			Name of Person		SEC	2023	
		MAC4REALTORS LLC			7 L A	2023 DEC 27 KK 11: 07	
			Firm Company		— <u>5</u>	27	;
		5120 SW 92ND TER			215 25.5 1.5.7		
		_ 	Address			11:0	•
		COOPER CITY FL 33328			. Li	7	
			City/State and Zip Code				
		ARIASFRANCY@ALCYT			•		
to on Samela on 1			to be used for future annual report no	tification)			
		oncerning this matter, please c	au;				
FRANCY A	RIAS		407 6189957 at ()				
	Name o	f Person	Area Code Daytii	ne Telephone Numb	er		
I nelosed is:	check for th	ic following amount:					
₹ J \$25.00 (Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certific	Filing Fe cate of St ed Copy tal copy is o	atus &	
	iling Addres gistration S		<u>Street Address:</u> Registration S	ection			
		orporations	Division of Co	orporations			
). Box 632 Hahassee, I		The Centre of 2415 N. Monr	Tallanassee oe Street, Suite	810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MAC4REALTORS LLC		
(<u>Name of the Limited Liability Co</u> (A Florida Lim	ompany as it now appears on our rec ited Liability Company)	ords.)
The Articles of Organization for this Limited Liability Comp	pany were filed on 04/10/2023	and assigned
lorida document number L23000177579		
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited	liability company here:	
he new name must be distinguishable and contain the words "Limited I	Liability Company," the designation "I	J.C" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS	<u> </u>	
		57 A.
		023 TX
nton non-mallion address. If another the		
nter new mailing address, if applicable:		<u> </u>
<u>lailing address MAY BE A POST OFFICE BOX)</u>		7 7
		निर्म 🔁 🔃
. If amending the registered agent and/or registered off	fice address on our records, <u>em</u>	ter the name of the new registo
gent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:		
isess registered villee Address.	Enter Florida street ada	dress
		Florida
	Cin.	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 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>	Address	Type of Action		
MGR LUIS EDUARDO LAVAGNA		5120 SW 92ND TER,COOPER CITY FL 33328	≡ Add		
			□Remove		
			□Change		
			🗀 Remove		
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ffective date, if other than the date of filing:			(opt	ional)		
an effective date is fisted, the date must be specific and cannot be ofe: If the date inserted in this block does not meet the ap	pplicable sta	of filing or more d duttory filing red	nan 90 days afte Juirements, th	er filing.) Pu iis date wil	rsuant to 60 I not be lis	05.0207 (sted as t
ocument's effective date on the Department of State's reco	ords.					
record specifies a delayed effective date, but not an effecti	ive time, at	12:01 a.m. on th	ne earlier of: (b) The 90)th day afi	ter the
is filed.						
ated <u>12-15</u> . <u>20</u> 2	23 .					
Clusia M. Play						
Signature of member or	authorized re	presentative of a	member			
(DRES printed name	$\Delta I = \mathbf{k} I$	JTERS/			