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L230000465675

Florida Department of State
Division of Corporations
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To: Division of Corporations
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From: Account Name : BRINKLEY, MORGAN
Account Number : 076077003213
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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN LMG PR MANAGER, LLC

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L24000099109 3

COVER LETTER

L24000099109 3

TO: Registration Section
Division of Corporations

SUBJECT: LMG PR MANAGER, LLC

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:

WILLIAM S. KRAMER, ESQ.

Name of Person

BRINKLEY MORGAN

Firm/Company

100 SE 3RD AVENUE, 23RD FLOOR

Address

FORT LAUDERDALE, FL 33394

City/State and Zip Code

william.kramer@brinkleymorgan.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

WILLIAM S. KRAMER

954

522-2200

At ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
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☐ \$55.00 Filing Fee &
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☐ \$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 Address:

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

L24000099109 3

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

L24000099109 3

LMG PR MANAGER, 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 10/09/2023 and assigned Florida document number L23000465675.

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)

7280 W PALMETTO PARK RD.

SUITE 306 N

BOCA RATON, FL 33433

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

7280 W PALMETTO PARK RD.

SUITE 306 N

BOCA RATON, FL 33433

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:

WILLIAM S. KRAMER, ESQ.

New Registered Office Address:

100 SE 3RD AVENUE, 23RD FLOOR

Enter Florida street address

FORT LAUDERDALE

, Florida 33394

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

L24000099109 3

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records: L24000099109 3

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	LOCKHART MANAGEMENT GROUP, INC.	7280 W PALMETTO PARK RD.	<input checked="" type="checkbox"/> Add
		SUITE 306 N	<input type="checkbox"/> Remove
		BOCA RATON, FL 33433	<input type="checkbox"/> Change
MGR	LMG ACQUISITIONS MANAGER, LLC	1066 BLOOMINGDALE AVENUE	<input type="checkbox"/> Add
		VALRICO, FL 33596	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	LMG ACQUISITIONS MANAGER, LLC	1066 BLOOMINGDALE AVENUE	<input type="checkbox"/> Add
		VALRICO, FL 33596	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

L24000099109 3

L24000099109 3

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There is no handwriting or other markings on the paper.

E. Effective date, if other than the date of filing: _____ (optional)
(If an effective 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 (3)(b)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated March 11, 2024

X 

Signature of a member or authorized representative of a member

JAMES LOCKHART

Typed or printed name of signee