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COVER LETTER

RCHANDISING SOFTWARE
Name of Limited Liability Company of address. The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: orbunov 73@ gmoul, com
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount: □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, \$25.00 Filing Fee □ \$30.00 Filing Fee & Certificate of Status & Certificate of Status Certified Copy Certified Copy (additional copy is enclosed) (additional copy is enclosed)

MAILING ADDRESS:

Registration Section
Division of Corporations

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

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MERCHANDISING SOFTWARE LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

(Name of the Limited	A Florida Limited Liability Company)	i vai iccorus.)
The Articles of Organization for this Limited Lia Florida document number <u>L 150000 419</u>		rch 06, 2015 and assigned
This amendment is submitted to amend the follow	ving:	
A. If amending name, enter the new name of	the limited liability company here:	<i>,</i>
The new name must be distinguishable and contain the wo	rds "Limited Liability Company," the design	nation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applica (Principal office address MUST BE A STREET)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u></u>	
B. If amending the registered agent and/o registered agent and/or the new registered offi	-	ir records, enter the name of the new
New Registered Office Address:	1001 N Federal H	lighway, Suite 307
	Hallandale Beach	, Florida <u>33009</u> Zip Code
New Registered Agent's Signature, if changing Re	egistered Agent:	
I hereby accept the appointment as registered provisions of all statutes relative to the proper accept the obligations of my position as regist being filed to merely reflect a change in the recompany has been notified in writing of this company	r and complete performance of my tered agent as provided for in Cha egistered office address, I hereby c	duties, and I am familiar with and pter 605, F.S. Or, if this document is
		招 吊
	If Changing Registered Agent	Signature of New Registered Agent
	Page 1 of 3	Cof STA

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 = A	uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			□ Remove
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			Add
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n effect te: If cumen recor	ve 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 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be lister's effective date on the Department of State's records. d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier
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