

L13000035686

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

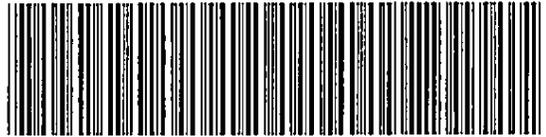
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*From the Desk of Alvaro Acevedo, Esq., C.P.A.*

January 22<sup>nd</sup> of 2024

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

**Re: Social Media Americas LLC Articles of Amendment**

To whom correspond.

We are sending this documentation to process the Articles of Amendment to add a Manager of Social Media Americas LLC, a Florida Limited Liability Company.

Enclosed with this communication, you will find the following documents:

**Exhibit A**

- Articles of Amendment to Articles of Organization of Social Media Americas LLC.

We are also sending you a check for \$60.00, payable to the Florida Department of State, for this process.

You will find a copy of this letter (the "Duplicate") alongside a pre-stamped, pre-addressed envelope. Please sign/stamp the Duplicate provided herein and return it to us for our records.

Should you need to contact me directly, my information is as follows:

Office Address: 1395 Brickell Avenue Suite 800, Miami, FL 33131, USA  
Office Number: (305) 517-3457  
WhatsApp: (754) 422-9814  
Email: [al@lawyercpa.com](mailto:al@lawyercpa.com)  
Fax: (305) 974-1813



*From the Desk of Alvaro Acevedo, Esq., C.P.A.*

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Thank you for your prompt attention in this matter.

Best Regards,

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Alvaro A. Acevedo, Esq., CPA, EA, LL.M(Tax)  
Attorney for Social Media Americas LLC.

# COVER LETTER

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**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Social Media Americas 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:

Alvaro A. Acevedo, Jr.

\_\_\_\_\_  
Name of Person

Brickell Law Group P.A.

\_\_\_\_\_  
Firm/Company

1395 Brickell Avenue, Suite 800

\_\_\_\_\_  
Address

Miami, Florida 33131

\_\_\_\_\_  
City/State and Zip Code

al@lawyercpa.com

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

For further information concerning this matter, please call:

Alvaro A. Acevedo, Jr.

305 517-3457  
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 &  
Certificate of Status

\$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

\$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

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

Social Media Americas 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 03/08/2013 and assigned Florida document number L13000035686.

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 "L.L.C." 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**



