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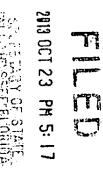
(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Name)
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Certified Copies	_ Certificates o	of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

TO:

Registration Section
Division of Corporations

SUBTECT

CLIQUE MARKETING, 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:

CRAIG I. KELLEY

Name of Person

KELLEY & FULTON, P.L.

Firm/Company

1665 PALM BEACH LAKES BLVD THE FORUM SUITE 1000

Address

WEST PALM BEACH, FL 33401

City/State and Zip Code

CRAIG@KELLEYLAWOFFICE.COM

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

For further information concerning this matter, please call:

CRAIG I. KELLEY

<u>561</u>491-1200

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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
22661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CLIQUE MARKETING, LLC		
(Name of the Limited L (A F	iability Company as it now appears on our records.) Torida Limited Liability Company)	
The Articles of Organization for this Limited Lia	bility Company were filed on 02/10/2000	and assigned
Florida document number L0000001580		
This amendment is submitted to amend the follow	ving:	
A. If amending name, enter the new name of t	the limited liability company here:	
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Company," the designation "LLC"	or the abbreviation
Enter new principal offices address, if applical	ble:	
(Principal office address MUST BE A STREET	ADDRESS)	·
	<u> </u>	
Enter new mailing address, if applicable:	C. 计 计	06.12
(Mailing address MAY BE A POST OFFICE B	<u>ox)</u>	ω <u>ι</u>
	——————————————————————————————————————	
R If amending the registered agent and/or	r registered office address on our records, enter them	3.7° Yamir
registered agent and/or the new registered offi	ice address here:	unio de the non
Name of New Registered Agent:		
New Registered Office Address:		<u> </u>
	Enter Florida street address	
	, Florida	
	City Z	ip 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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member **Type of Action** <u>Title</u> Name <u>Address</u> 6187 NW 24TH TERRACE **MGRM** JONATHAN LARKIN BOCA RATON, FL 33496 Remove Remove Remove

ucucing any other	information, enter change(s) here: (Attach additional sheets, if necessary.)
10/18/13	
jolistis	Timuer.
jolistis	Signature of a member or authorized representative of a member

Page 3 of 3

Filing Fee: \$25.00

