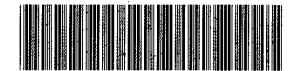
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(Re	questor's Name)	,
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SECKETARY OF STATE
TALLAHASSEEL FLORIDA

D. BRUCE

JUL 29 2008

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Marketing Done Smart 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:
Scott Wall (Name of Person)
Marketing Done Smart LLC. (Firm Company)
3611 Ottawa Lane Dis &
Cooper C:Ly Fl. 33026 (City State and Zip Code) ALECT JUL 28 (City State and Zip Code)
For further information concerning this matter, please call:
Scott Wall (Name of Person) at (954) 608-1369 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{Certificate of Status} \text{Status S55.00 Filing Fee & Certified Copy (additional copy is enclosed)} \text{\$\text{Certified Copy (additional copy is enclosed)}} \text{\$\text{Certified Copy (additional copy is enclosed)}}
MAILING ADDRESS. STREET/COLDIED ADDRESS.

MAILING ADDRESS:

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

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Marketing Done	Smart	LLC.			
(Name of the Limited Liab (A Flor	oility Company as it novida Limited Liability Co	v appears on our recompany)	ords.)		
The Articles of Organization for this Limited Liability Florida document numberL 0 70000084	ty Company were filed			ssigned	
This amendment is submitted to amend the following	g:		TV.RY OF HASSEE, F	28 PH	
A. If amending name, enter the new name of the	limited liability comp	any here:	STATE	: U	
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liabilit	y Company," the desig	gnation "LLC" or th	e abbreviation	
B. If amending the registered agent and/or re registered agent and/or the new registered office s		ess on our r e cords,	, enter the name	of the new	
Name of New Registered Agent:		·			
New Registered Office Address:	(Enter Florida street address)				
	, Florida				
			(Zip C	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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM = Managing Member

Title Address Type of Action Name MGRM Add Remove □Add Remove Add Remove Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 30 Zoaf June Dated Signature of a member or authorized representative of a member Scott Wall
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00