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### COVER LETTER 4

TO: Registration Section Division of Corporations
SUBJECT: TNCENTIVE 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:
Steven Kessler
INCENTIVE MARKETING, LLC
360 F 755 feet #176 Ny Ny 1002
Steve E Sun RISE PREMIUMS - COM E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
SAUCN KeSSIER at (917) 721-8137  Name of Person  Area Code  Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25,00 Filing Fee Certificate of Status □ \$55,00 Filing Fee Certified Copy (additional copy is enclosed) □ \$60,00 Filing Fee, 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
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compa (A Florida Limited I			
The Articles of Organization for this Limited Liability Company Florida document number $\angle 070009$	were filed on <u>/</u> 517	147 3 266 7 and assign	ned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company he	<u>re</u> :	
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the de	esignation "LLC" or the abbreviation "L.L.C	· · ·
Enter new principal offices address, if applicable:		<del></del>	<u> </u>
(Principal office address MUST BE A STREET ADDRESS)	<del></del> ,	<b>9 A</b> UG	1810 1038 1038
		ි	- 유류 - 유류
		7	
Enter new mailing address, if applicable:		A <del>x</del> 0:	- 유유다 - 유유다
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>	
		7	2
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here.  Name of New Registered Agent:		our records, enter the name of	the new
New Registered Office Address:			
	Enter Flor	ida street address	
		, Florida	
	City	Zip Code	
New Registered Agent's Signature, if changing Registered Agent:			SEGRETARY OF STATE DIVISION OF CORPORATION:
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as period to merely reflect a change in the registered office accompany has been notified in writing of this change.	performance of provided for in C	my duties, and I am familiar with a Chapter 605, F.S. Or, if this docume	ınd

If Changing Registered Agent, Signature of New Registered Agent

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 = Authorized Member

Title ^	<u>Name</u>	Address	Type of Action
)MBR	Susan Kessler	300 E.755+ #176 NYHY 10021	Add
			Remove
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an effective date is listed, the ote: If the date inserted in	an the date of filing: date must be specific and cannot be prior to date of filing or menths block does not meet the applicable statutory filing in the Department of State's records.	(optional) nore than 90 days after filing.) Pursuant to 605.02
record specifies a d	elayed effective date, but not an effective t ne record is filed.	time, at 12:01 a.m. on the earlier
	/	
The 90th day after the 'i		
The 90th day after the	2018, A	
The 90th day after the stated S	Signature of a member or authorized representative	of a member

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Filing Fee: \$25.00