

LD80000003987

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

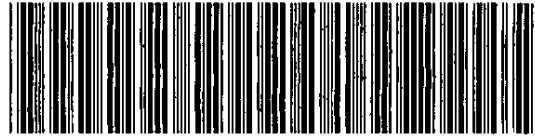
Special Instructions to Filing Officer:

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AUG 14 2008

EXAMINER

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08 AUG 13 AM 8:23

SECRETARY OF STATE
TALLAHASSEE FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Strategic Market, LLC,
(Name of Limited Liability Company)

The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

JOHN MANDIGO
(Contact Person)

Strategic Market, LLC,
(Firm/Company)

1327 Meeting Place
(Address)

Orlando, FL 32814
(City/State and Zip Code)

For further information concerning this matter, please call:

JOHN MANDIGO at (954) 243-1054
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

☒ \$25 Filing Fee

☐ \$55 Filing Fee &
Certified Copy

STREET/COURIER ADDRESS:

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

MAILING ADDRESS:

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

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

Strategic Market, 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 1/10/08 and assigned
Florida document number ETN 26-1717651

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 end with the words "Limited Liability Company," the designation "LLC" 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)

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

(MGR)	Title	Name	Address	Type of Action
	Vice President	Gabriel Powell	P.O. Box 250 Apopka, FL 32704	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
(MGR)	Partner	Rocco Mazzella	322 Cassia Drive Davenport, FL 33897	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
				<input type="checkbox"/> Add <input type="checkbox"/> Remove
				<input type="checkbox"/> Add <input type="checkbox"/> Remove
				<input type="checkbox"/> Add <input type="checkbox"/> Remove
				<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

JOHN MANDEGO + Gabriel Powell ARE ONLY
MANAGERS + OWNERS OF Strategic Market, LLC,
- JOHN MANDEGO HAS 51% ownership
- Gabriel Powell HAS 49% ownership

Dated 7/20/08

Signature of a member or authorized representative of a member

JOHN MANDEGO
Typed or printed name of signee

