L09000106253

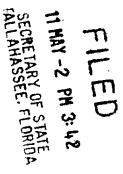
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J. BRYAN

MAY -4 2011

EXAMINER

COVER LETTER

TO:	Registration Se Division of Cor				
SUBJE	CT:	·· ADCOM MARKETING, LLC			
50245		Name of Limit	Name of Limited Liability Company		
The enc	losed Articles of	Amendment and fee(s) are sub-	mitted for filing.		
Please r	eturn all correspo	indence concerning this matter	to the following:		
MA			ARIANO SEVERINO		
			Name of Person		
ADO			OM MARKETING, LLC	SEE 3	
			Firm/Company	AR	
7800 N UN			IVERSITY DR IVE SUITE 30		
			Address		
			AMARAC FL 33321	MAY -2 PH 3: 42 ECRETARY OF STATE LLAHASSEE, FLORIC	
			City/State and Zip Code	OF T	
marianoseverinos@gmail.com E-mail address: (to be used for future annual report notification)					
Ear fine	har information o	E-mail address: (to concerning this matter, please co	-	tion)	
roi iuri	ner intormation c	oncerning inis matter, please co	411.		
MARIANO SEVERINO			_{at (} 954 ₎ 720-1919 (OR 954-247-8515	
Name of Person			Area Code & Daytime	Celephone Number	
Enclose	ed is a check for the	he 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			STREET/COURIE Registration Section	R ADDRESS:	

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

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

THE RESERVE TO ST. LE CO. LE C

ADCOM MARKETING, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization fo	r this Limited Liability Company v	vere filed on	11/04/2009	and assigned		
Florida document number	L09000106253					
This amendment is submitted t	o amend the following:					
A. If amending name, enter t	he new name of the limited liabil	ity company here:				
The new name must be distinguis "L.L.C."	hable and end with the words "Limite	ed Liability Company	," the designation "L	LC" or the abbreviation		
Enter new principal offices a	ddress, if applicable:			· · · · · · · · · · · · · · · · · · ·		
(Principal office address MUS	T BE A STREET ADDRESS)					
Data and the state of the state						
Enter new mailing address, if						
(Mailing address MAY BE A	POST OFFICE BOX)					
7 1 1 1	1(he name of the name		
	red agent and/or registered offi <u>ew registered office address here</u>		r records, enter 1	ne name of the new		
Name of New Regist	ered Agent:	, <u>,</u>				
New Registered Office	ce Address:		71 11 11			
		Enter Florida street address				
	, Floric					
		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 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 <u>Title</u> <u>Address</u> Type of Action <u>Name</u> MGR SANTIAGO SEVERINO 7800 N UNIVERSITY DR SUITE 301 ✓ Add TAMARAC FL 33321 Remove Add 🔲 Remove ☐ Add Remove Remove \square Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) APRIL 20 2011 Dated Signature of a member or authorized representative of a member

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00