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EXAMINER



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SECRETARY OF 1941 E

COVER LETTER

Division of Co	orporations			
SUBJECT:	Streamline M	arketing Group, LL	.c	
		ited Liability Company	· · · · · · · · · · · · · · · · · · ·	
The enclosed Articles o	f Amendment and fee(s) are sub	bmitted for filing.		
Please return all corresp	ondence concerning this matter	r to the following:		
	-	-		
		Michael Greenspan		
		Name of Person	·	•
	Stream	nline Marketing Group	. LLC	
		Firm/Company		-
	10.	191 West Sample Roa	nd	
		Address		•
	0	- LOude - Electric 200	.05	
	Cora	al Springs, Florida 330 City/State and Zip Code	965	
	marketing@)streamlinemarketing(Group.net	
	E-mail address: (to be used for future annual repo	ort notification)	
For further information	concerning this matter, please of	call:		
Mich	nael Greenspan	at (954).	579-3005	
	of Person	Area Code &	Daytime Telephone Numbe	r
Enclosed is a check for	the following amount:			
\$25.00 Filing Fee	\$30.00 Filing Fee &	\$55.00 Filing Fee &	\$60.00 Fil	
	Certificate of Status	Certified Copy (additional copy is er	closed) Certified	
			(addition	nal copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section

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	ny as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited Liability Company Florida document number L 100000/4240		and assi	gned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	pility company here:		
The new name must be distinguishable and end with the words "Lim" "L.L.C."	ited Liability Company," the designation "LLC"	or the at	obreviation
Enter new principal offices address, if applicable:	Streamline Marketing Group, LLC		Ξω
(Principal office address MUST BE A STREET ADDRESS)	10191 West Sample Road	<u> </u>	SCF
	Coral Springs, Florida 33065	Ř 20 ≱	HO H
Enter new mailing address, if applicable:		<u> </u>	
(Mailing address MAY BE A POST OFFICE BOX)		<u></u>	PAN
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her	· · · · · · · · · · · · · · · · · · ·	iame of	the nev
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida street address		
	, Florida		
		in 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 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 = N	lanaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amend	ling any other information, enter chang	e(s) here: (Attach additional sheets, if necessary.)	_
_			
			_ _
Dated	Michal Houng		
	MILHAEL GREE Typed	or authorized representative of a member Sugar Or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00