## 11000050658

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## **COVER LETTER**

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TO:	Registration Sec Division of Corp			
SUBJ	<del>የ</del> ረ⊤∙	Chang	ge Of Officers	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	~~··		ited Liability Company	
		,		
The en	closed Articles of A	mendment and fee(s) are sul	bmitted for filing.	
Please	return all correspon	dence concerning this matte	r to the following:	
			Mark Anderson	
			Name of Person	···
		Max	Results Marketing, LLC	
			Firm/Company	
7004 Lainhtea Mary				
	7021 Leighton Way Address			
		•		
			Orlando, FL 32822 City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·
		manderso	n@maxresultsmarketing.c	om
		E-mail address: (	to be used for future annual report noti-	fication)
For fur	ther information cor	acerning this matter, please of	all:	
	Mark	Anderson	at ( 407 )	2524709
•	Name of I	Person .	Area Code & Daytin	oc Telephone Number
Enclose	ed is a check for the	following amount:		
<b>∏</b> \$25	.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S\$55.00 Filing Fee & Certified Copy (additional copy is enclosed	S60.00 Fifing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Registrat Division P.O. Box	G ADDRESS: ion Section of Corporations 6327 ec, FL 32314	STREET/COURI Registration Section Division of Corpor Clifton Building 2661 Executive Ce Tallahassee, FL 32	on rations enter Circle



October 14, 2011

MARK ANDERSON 7021 LEIGHTON WAY ORLANDO, FL 32822

SUBJECT: MAX RESULTS MARKETING LLC

Ref. Number: L11000050658

We have received your document for MAX RESULTS MARKETING LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Neysa Culligan Regulatory Specialist II

Letter Number: 911A00023595

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

11 OCT 19 PM 4: 14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Max R (Name of the Limited Liab (A Flori	esults Marketing, LLC Illry Company as it now appear ida Limited Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Liability Florida document number		4/29/11	and assigned
This amendment is submitted to amend the following  A. If amending name, enter the new name of the		<u>e</u> :	
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Compa	ny," the designation "	LLC" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET AD	DRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or re registered agent and/or the new registered office a	gistered office address on o <u>ddress here</u> :	ur records, <u>enter</u>	the name of the new
Name of New Registered Agent:		to a Marie to Marie To Table	
New Registered Office Address:	Ent	er Florida street add	hress
		. Florida	
<del></del>	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>Name</u>	Address	Type of Action		
CEO_	William I Sievers	7360 Curry Ford Rd Suite 721914 Orlando, FL 32822	Add Remove		
			☐ Add ☐ Remove		
			Add Remove		
	· · · · · · · · · · · · · · · · · · ·		Add Remove		
			Add Remove		
D. If amend	ing any other information, enter change(:	s) here: (Attach additional sheets, if necessary.)	Add Pense CRETARS		
			19 PM 4: 14 ARY OF STATE ASSEE, FLORIDA		
 Dated	Signature of a marshar of	authorized representative of a member			
_	Mar	rk J Anderson			
	Typed or	printed name of signee			

Page 2 of 2

Filing Fee: \$25.00