L110000 53385

(Req	uestor's Name)	
(Add	ress)	
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(City	/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Nan	ne)
(Doc	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer:	
	illing Officer.	





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2015 MAY 22 AM 4: 32

MAY 26 2015 J. HARRIS

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: 125 Marke 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:
Name of Person
125 Marketing Firm/Company
3319 7200 Ducenso Ecist
City/State and Zip Code City/State and Zip Code City/State and Zip Code E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person at CH 73 - 27 S
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee

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

135 Marketing	LLC
(<u>Name of the Limited Liability Compa</u> (A Florida Limited	iny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company	and assigned ment number \(\)
Florida document number <u>L110000 5338</u> 5	(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) es of Organization for this Limited Liability Company were filed on
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	2305 60th Drive Ecist
(Principal office address MUST BE A STREET ADDRESS)	Bradenton, FL 34203
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
registered agent and/or the new registered office address her	
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida
	·
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent and agr	ve to act in this capacity. I further agree to comply with the

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

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 605, 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.

2 44 4: (

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 = MS $AMBR = AS$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			☐ Add
			Remove
			☐ Change
			Add
			☐ Remove
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			□ Remove
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ffective date, if other than the data an effective date is listed, the date must be lote: If the date inserted in this block ocument's effective date on the Department.	c does not meet the ap	plicable statutory f	(or or more than 90 days at iling requirements, t	otional) fler filing.) Pursuant to this date will not be	o 605.020 : listed a
e record specifies a delayed of The 90th day after the recor	ffective date, but d is filed.	not an effectiv –	e time, at 12:01	l a.m. on the e	arlier o
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Page 3 of 3

Filing Fee: \$25.00