L12000137987

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TALLAHASSEE, FLORIDA

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COVER LETTER

TO:	Registration Sec Division of Corp				
CLIDIE	BIG RIC	H MARKETING, LLC			
SUBJE	.C1:	Name of Lim	ited Liability Company		
		Amendment and fee(s) are subnidence concerning this matter	-		
		RICHARD L. GORDO	ИС		
			Name of Person		
		BIG RICH MARKETI	NG, LLC		
			Firm/Company	· · · · · · · · · · · · · · · · · · ·	
		1511 NW 173 Terrace			
			Address		
		Miami Gardens, FL 33	3169	_	
		bigrichmktg@hotmail.c	City/State and Zip Code	SECSETARY ALLAHASSE	-
		E-mail address: (to be used for future annual report notific	ation) AS	-
For fur	ther information co	oncerning this matter, please ca	all:	im co	
Richa	ard L. Gordon		305 205-8702 at (FLOO	_
	Name of	Person		Felephone Number	
Enclose	ed is a check for th	e following amount:			
\$25	5.00 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 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

BIG RICH MARKETING, LLC	
(Name of the Limited I (A)	Jability Company as it now appears on our records.) Florida Limited Liability Company)
The Articles of Organization for this Limited Liabi Florida document numberL12000037987	hity Company were filed on March 16, 2012 and assigned and assigned
This amendment is submitted to amend the following	ng:
A. If amending name, enter the new name of the	e limited liability company here:
The new name must be distinguishable and contain the words	"Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable	e:
(Principal office address MUST BE A STREET A	(DDRESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BO	<u></u>
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our records, enter the name of the new
	ARE I
Name of New Registered Agent:	AR SSEE
New Registered Office Address:	
	Enter Florida street address
-	Florida City Zip Code
	CIIV ZIP COUR

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 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.

If Changing Registered Agent, Signature of New Registered Agent

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 = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Gwendolyn Wilson	1511 NW 173 Terrace	Add
		Miami Gardens, FL 33169	■ Remove
			Change
	<u></u>		Add
			☐ Remove
			□ Change
			☐ Add
			☐ Remove
			TALLAHASSEE
			AHASSEE, FLORID
			ELV999
			☐ Remove
			Change
			Add
			Remove
			☐ Change

		
		
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Effective date, if other than the date of filing: f an effective date is listed, the date must be specific and cannot be prior to Note: If the date inserted in this block does not meet the applical document's effective date on the Department of State's records.	(optional) o date of filing or more than 90 days after filing.) Pursuant to 605.0 ole statutory filing requirements, this date will not be listed	0207 d as
e record specifies a delayed effective date, but not The 90th day after the record is filed.	an effective time, at 12:01 a.m. on the earlie	r of
Dated March 11 2016		
, , ,	<u>-</u> .	
Signature of a member or author	ized representative of a member	
	med representatives a member	
Richard L. Gordon		

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Filing Fee: \$25.00