Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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	Account Name : RC TAX SERVICE LLC	Ö ·	Ξ.
	Account Number : 120140000083	O P	Ε.
	Phone : (407)932-0040	<u></u>	7
	Fax Number : (407)520-5473	υ-	
	email address for this business entity report mailings. Enter only one email		гe
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

MONSTERS MARKETING, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

CRETARY OF STATE

MAY 3 1 2016

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

OF

H16000 | 315823

MONSTERS MARKETING LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 04/23/2012 and assigned Florida document number L12000054723 This amendment is submitted to amend the following: A. If amending name, enter the new name of the 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: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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

Florida

MAY-28-2016 15:25 From:

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To: 8506176383

Page: 3/4

If smending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

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MGR - Manager AMBR = Authorized Member

Title	Name	Address	Type of Action
MGR	MABEL LOPEZ	2841 OCONNELL DR.	Add
		KISSIMMEE, FL 34741	□ Remove
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