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COVER LETTER

TO:	Registration Se Division of Cor			
SUBJEC		on Services Marketing, LLC		
SUBJEC	J1.	Name of Lim	nited Liability Company	
Γhe encl	osed Articles of	Amendment and fee(s) are sub	emitted for filing.	
Please re	eturn all correspo	ondence concerning this matter	to the following:	
		Jessica Buczynski		
			Name of Person	
			Firm/Company	
		16650 Scheer Blvd		
			Address	
		Hudson, FL 34667		
		jessicabuczynski@gmail.co	City/State and Zip Code	
		E-mail address: (to be used for future annual report notif	ication)
or furth	er information c	oncerning this matter, please c	all:	
essica f	Buczynski		978 866 9288 at ()	
	Name o	f Person	Area Code Daytime	Telephone Number
Enclosed	is a check for th	he following amount:		
\$25.	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

(Name of the Lim	ited Liability Company as it now appears of (A Florida Limited Liability Company)	n our records.)
The Articles of Organization for this Limited I	Liability Company were filed on 11/26/	2012 and assigned
This amendment is submitted to amend the fol	lowing:	(TER)
A. If amending name, enter the new name of	of the limited liability company here:	Constitution of the consti
The new name must be distinguishable and contain the	words "Limited Liability Company," the design	nation "LLC" or the abbreviation "LLC"
Enter new principal offices address, if appli	cable:	75 75 P. 12
(Principal office address MUST BE A STRE)	ET ADDRESS)	ट्रांग डॅ
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<i>BOX</i>)	
B. If amending the registered agent and registered agent and/or the new registered of		ur records, <u>enter the name of the n</u>
Name of New Registered Agent:	Jessica Buczynski	
New Registered Office Address:	16650 Scheer Blvd	
	Enter Florida	street address
	Hudson	, Florida ³⁴⁶⁶⁷
	Citv	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 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.

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>	Name	<u>Address</u>	Type of Action
MGR	Zan Kozikowski	16650 Scheer Blvd	
		Hudson, FL 34667	■ Remove
			☐ Change
MGR	Jessica Buczynski	16650 Scheer Blvd	■ Add
		Hudson, FL 34667	□ Remove
			Change
			Remove
			☐ Change
			□ Remove
			Change
			Add
			□ Remove
			Change
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envenge it ather than th		rior to date of filing or mo		ng.) Pursuant to 605.0
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Filing Fee: \$25.00