L13000023183

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COVER LETTER



TO:

Registration Section **Division of Corporations**

Mega Marketing Group, LLC

Name 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:

Mandy Kincaid

Name of Person

Mega Marketing Group, LLC

8245 Business Park Drive

Address

Port St. Lucie, FL 34952

City/State and Zip Code

mizmandylee@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mandy Kincaid

at (772) 579-6716

Area Code & Daytime Telephone Number

Enclosed is a check for the 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

Mega Marketing Group 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 February 12, 2013 and assigned Florida document number L13000023183						
This amendment is submitted to amend the follo						
A. If amending name, enter the new name of	the limited liabi	lity company here	2:			
The new name must be distinguishable and end with "L.L.C."	the words "Limite	ed Liability Compar	ny," the designation "L	LC" or the abbreviation		
Enter new principal offices address, if applicable:		8245 Business Park Drive				
(Principal office address MUST BE A STREET ADDRESS)		Port St. Lucie	Port St. Lucie, FL 34952			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE I B. If amending the registered agent and/or registered agent and/or the new registered of	or registered off		ur records, <u>enter t</u>	he name of the new		
Name of New Registered Agent:	Mandy Kinc	aid		Fo -		
New Registered Office Address:	8245 Busine	ess Park Drive		SEP T		
	Port Saint L		er Florida street add Florida 34	(A) (A) (A)		
New Registered Agent's Signature, if changing R	legistered Agent:			9: 10 PATE ORADE		
I hereby accept the appointment as registered the provisions of all statutes relative to the pr accept the obligations of my position as regis being filed to merely reflect a change in the r company has been notified in writing of this of	roper and completered agent as peepstered office of the complete of the comple	ete performance o rovided for in Ch	of my duties, and I a capter 608, F.S. Or,	um familiar with and if this document is		

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

Title MGRM	Mandy Kincaid	Address 1086 Trowbridge Court Longwood, FL 32750	Type of Action Add Remove
MGR	Stanley Walvick	9026 Pumpkin Ridge Road Port St. Lucie, FL 34986	Add
			Add Remove Add Remove
			Add Remove
			Add Remove

D. If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Dated <	Sapt. 12,2013
	Mander Kincaid
	Signature of a member or authorized representative of a member
	Mandy Kincaid
	Typed or printed name of signee

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Filing Fee: \$25.00