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of 8/3/2022

COVER LETTER

Division of Corporations
SUBJECT: Marketing Experts LLC Warne 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:
Abdullah Gasha Name of Person
Marketry Experts LLC Firm/Company
16130 N.W. 17th Court
Opa-lucka, FL 33054 Chy/State and Zip Code Aballah & Hemreketing experts. io E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Abdullah Gosha at 786, 992 - 1385 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
■ \$25.00 Filing Fee \$\ \text{Certificate of Status}\$\$ \[\begin{array}{cccccccccccccccccccccccccccccccccccc

TO:

Registration Section

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Eability Company as it now appears on our records.) (A Florida Limited Liability Company)	
>7/a-1.	
The Articles of Organization for this Limited Liability Company were filed on <u>08/27/3013</u> and assigned Florida document number <u>L\3000\2\296</u>	d
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) 50 to 450	
Doral, FL 33166	<u> </u>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) Solve 450	<u>'</u>
(Mailing address MAY BE A POST OFFICE BOX) Doral, FL 33166	
B. If amending the registered agent and/or registered office address on our records, enter the name of the new regagent and/or the new registered office address here:	istered
Name of New Registered Agent: Abdullah Gosha	
New Registered Office Address: 16130 N. W. 17th Cort Enter Florida street address	
Opa-locka Florida 33054 City 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.

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>	<u>Address</u>	Type of Action
MGR	Abdullah Gosha	16130 N.W. 17th rourt	🖫 Add
		16130 N.W. 17th court Opa-locha, FL 33054	□Remove
			□Change
			□ Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
		- 	□Add
			□Remove
			□Change
			□Add
			□Remove
			□ Change
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			Remove

	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
_	
_	
	
(If an effec Note: If	e date, if other than the date of filing:
he record : ord is filed	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the it.
Dated _	May 20th 2022
	Signature of a member or withorized representative of a member
	Abdullah Gasha Typed or printed name of signee