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SANTANA STRINGER

COVER LETTER

TO: Registration Se Division of Cor			٠
MARAMA	ALLC		•
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	JARED D JONES CPA		
		Name of Person	-
	JONES&CO. CPAS & AI	OVISORS	
		Firm/Company	
	3807 N 12TH AVENUE		
		Address	
	PENSACOLA FL 32503		
		City/State and Zip Code	
	JARED@JONESANDCO.	COM to be used for future annual report not	· ·
For further information c	concerning this matter, please c		incation)
JARED D JONES CPA		850 450-8960 at ()	
Name o	of Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for the	he following amount:		
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	Cl \$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		Street Address:	action
Registration : Division of C		Registration Se Division of Co	
P.O. Box 632	27	The Centre of	Tallahassee
Tallahassee,	FL 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

MARAMA LLC	6.	
(<u>Name of the Limited Liability Compa</u> (A Florida Limited)	any as it now appears on our Liability Company)	r records.)
he Articles of Organization for this Limited Liability Company lorida document number	were filed on MARCH?	21 2014 and assigned
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liab	oility company here:	
ie new name must be distinguishable and contain the words "Limited Linbi	ility Company." the designation	าก "LLC" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:	3807 N 12TH AVENU	E
Principal office address MUST BE A STREET ADDRESS)	PENSACOLA FL 3250	03
nter new mailing address, if applicable:	3807 N 12TH AVENU	-2 PA
Mailing address MAY BE A POST OFFICE BOX)	PENSACOLA FL 3250	33 E E
		⊕ 3
If amending the registered agent and/or registered office sent and/or the new registered office address here: Name of New Registered Agent: JARED D JON		, enter the name of the new regi
Name of New Registered Agent.		
New Registered Office Address: 3807 N 12TH 2	-	
	Enter Florida stree	
PENSACOLA		, Florida ³²⁵⁰³
	City	Zip Code

N

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	THOMAS H GLESSER	20 WEST LEE STREET	□Add
		PENSACOLA FL 32501	■Remove
			□Change
AMBR	JO ANNE GLESSER	20 WEST LEE STREET	□Add
		PENSACOLA FL 32501	= Remove
			☐ Change
MGR	THOMAS H GLESSER	3807 N 12TH AVENUE	≅ Add
		PENSACOLA FL 32503	□ Remove
			□Change
MGR	JO ANNE GLESSER	3807 N 12TH AVENUE	= Add
		PENSACOLA FL 32503	□Remove
			□Change
			□Add
		, , , , , , , , , , , , , , , , , , ,	□Remove
			□Change
			□Add
			□Remove
			□ Chango

	The EIN o	f this LLC as currently appears on Sunbiz is incorrect. The EIN should be amended to 36-4781532.	
we date, if other than the date of filing: (optional) (cive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 if the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as int's effective date on the Department of State's records. 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 d. APRIL 24			
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APRIL 24 2024	effective date is	s listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0 inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed)207 (3° I as the
John Wese	ord specifies filed.	a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after t	the
Signature of a member or authorized representative of a member	d APRIL 24	$\frac{1}{\sqrt{1+\frac{2024}{1+\frac{1}{2024}}}}$	
Signature of a member or authorized representative of a member		Jaline Wese	
		Signature of a member or authorized representative of a member	

Typed or printed name of signee

COVER LETTER

10: Registration S Division of Co			
MARAM	A LLC		
SUBJECT:	Name of Li	nited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are su	bmitted for filing.	
Please return all corresp	ondence concerning this matte	r to the following:	
	JARED D JONES CPA		
		Name of Person	177.2.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.
	JONES&CO. CPAS & A	DVISORS	
	•	Firm/Company	· · · · · · · · · · · · · · · · · · ·
	3807 N 12TH AVENUE		
		Address	
	PENSACOLA FL 32503		
		City/State and Zip Code	
	JARED@JONESANDCO.		·
		to be used for future annual repo	rt notification)
For further information of	concerning this matter, please o	all:	
JARED D JONES CPA		850 450-89 at ()	60
Name o	of Person	Area Code D	aytime Telephone Number
Enclosed is a check for the	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 Addres	_	Street Addres	
Registration S Division of C		Registration	
P.O. Box 632			Corporations of Tallahassee

Tallahassee, FL 32314

No Oneck

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MAKAMA LLC			
(Name of the Limi	ted Liability Compa (A Florida Limited)	any as it now appears on o Liability Company)	ur records.)
The Articles of Organization for this Limited L Florida document number <u>L14000047571</u>	.iability Company	were filed on MARCH	and assigned
This amendment is submitted to amend the foll	lowing:		
A. If amending name, enter the new name o	of the limited liab	nility company here:	
The new name must be distinguishable and contain the v	words "Limited Liabil	lity Company," the designat	tion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applic	able:	3807 N 12TH AVENU	UE
(Principal office address MUST BE A STREE	ET ADDRESS)	PENSACOLA FL 325	503
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE	BOX)	3807 N 12TH AVENU PENSACOLA FL 325	
B. If amending the registered agent and/or a agent and/or the new registered office addre		address on our records	s, enter the name of the new register
Name of New Registered Agent:	JARED D JON	ES	
New Registered Office Address:	3807 N 12TH A		
		Enter Florida stre	et address
	PENSACOLA		, Florida ³²⁵⁰³
		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>	Address	Type of Action
MGR	THOMAS H GLESSER	20 WEST LEE STREET	□Add
		PENSACOLA FL 32501	■Remove
			□Change
AMBR	JO ANNE GLESSER	20 WEST LEE STREET	□ Add
		PENSACOLA FL 32501	≡Remove
			□Change
MGR	THOMAS H GLESSER	3807 N 12TH AVENUE	≅Add
		PENSACOLA FL 32503	□Remove
			□Change
MGR	JO ANNE GLESSER	3807 N 12TH AVENUE	
		PENSACOLA FL 32503	□ Remove
			
			□Add
			□Remove
			□ Change
			
			□ Remove
			Change

The EIN of	nis LLC as currently appear	ars on Sunbiz is incom	ect. The EIN should	be amended to 36-47	81532.
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Footive data if a	shamakara da a com				
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ted APRIL 24		2024			
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