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K.SALY EXAMINER OCT 21 2014

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Direct Marketing 4 Dealers, 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 9/3/14 and assigned Florida document number L14000137517 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Direct Mail 4 Dealers, LLC The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: 1485 International Parkway, Suite 1001 (Principal office address MUST BE A STREET ADDRESS) Lake Mary, FL 32746 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 , Florida

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.

City

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records: FILED MGR = Manager 2014 OCT 17 PM 3: 08 AMBR = Authorized Member TALLAHASSEF. FLORIDA <u>Title</u> <u>Name</u> **Address Type of Action** □ Add ☐ Remove _ Add _□ Remove □ Add ☐ Remove ☐ Add _□ Remove _D Add □ Remove _ 🗆 Add ☐ Remove

famend	ng any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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	Signature of a member or authorized representative of a member
	Michael Hlavsa
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

