L14000170824

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A. P**ARISHANI**

SEP - 5 2023

COVER LETTER

TO: Registration Section
Division of Corporations

E MARKETING CONSULTANTS, LLC SUBJECT: 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: CARLOS IXTLAHUAC Name of Person E MARKETING CONSULTANTS, LLC Firm/Company Address City/State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: **CARLOS IXTLAHUAC** Daytime Telephone Number Name of Person Enclosed is a check for the following amount: □ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee. **■** \$25.00 Filing Fee Certificate of Status Certificate of Status & Certified Copy Certified Copy (additional copy is enclosed) (additional copy is enclosed)

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

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E MARKETING CONSULTANTS, LLC

(Name of the Limited Liability Company as it now appears on our records.)

(CENT OF THE SAME	(A Florida Limited	Liability Company)	22
The Articles of Organization for this Limited L Florida document number L14000170824	iability Company	were filed on 11/03/2014	and assigned
This amendment is submitted to amend the following	owing:		
A. If amending name, enter the new name of	f the limited liab	ility company here:	
The new name must be distinguishable and contain the	vords "Limited Liabi	lity Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applic	cable:	4403 E. HENRY AVENU	JE
(Principal office address MUST BE A STREET ADD		TAMPA, FL 33610	
Enter new mailing address, if applicable:		4403 E. HENRY AVENU	JE
(Mailing address MAY BE A POST OFFICE BOX)		TAMPA, FL 33610	
B. If amending the registered agent and/or agent and/or the new registered office addre	•	address on our records, <u>s</u>	enter the name of the new registe
Name of New Registered Agent:	JEAN PAUL N	MENTADO	
New Registered Office Address:	4403 E. HENR	Y AVENUE	
		Enter Florida street	address
	TAMPA		
		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 th 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 addior removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
Pres	CARLOS IXTLAHUAC	5840 W. CYPRESS STREET #F	□ Add
		TAMPA, FL 33607	≣Remove
			□Change
Pres JEA!	JEAN PAUL MENTADO	403 E. HENRY AVENUE	≣ Add
		TAMPA, FL 33610	□Remove
			Change
			707.7 ——————————————————————————————————
			Remove
			 □Add
			Remove
			Change
			🗀 Add
			□ Reтоve
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			□Remove
			□Change

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te: If the date inserted in this becument's effective date on the L	lock does not meet the applicab	le statutory filing require	ments, this date will r	not be listed a
comene s effective date of the r	epartment of state seconds.			
ecord specifies a delayed effective	e date, but not an effective tim	e, at 12:01 a.m. on the ea	irlier of: (b) The 900	h day after the
is filed.				
	2023			
is filed. $Ca/vs = I_{ij}$	Halindo	- •		

Filing Fee: \$25,00