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(R	equestor's Name)	
(A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(В	usiness Entity Name)	
(D	Ocument Number)	·
Certified Copies	Certificates of	Status
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COVER LETTER.

TO:	Registration Sec Division of Corp				
		MARKETING VIDEO , LLC			
SUBJE	CT:	Name of Lim	ited Liability Company		
The encl	losed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please re	eturn all correspo	ndence concerning this matter	to the following:		
		Maria Gabriela Sanchez-S	ilva		
			Name of Person		
		ALLURE Marketing Video	o LLC		
			Firm/Company		—িক্ টে
		400 Leslie Drive Apt 422			高品品
			Address		J. 0 5
		Hallandale Beach, FL 330	09		- 30 z 10
		allurevideolifestyle@gmail			- 45 - 7
		E-mail address: (to be used for future annual report no	otification)	
For furth	ner information c	oncerning this matter, please c	all:		
Maria C	Gabriela Sanchez-	Silva	786 326-3374 at ()		
	Name of	f Person	Area Code Dayti	ime Telephone Numb	er
Enclose	d is a check for th	ne following amount:			
\$25	.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certifie	Filing Fee, sate of Status & sd Copy al 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

ALLURE MARKETING VIDEO	•		
(Name of the Lim	(A Florida Limited	any as it now appears of Liability Company)	n our records.)
The Articles of Organization for this Limited I lorida document number	Liability Company	were filed on 11/14	and assigned
his amendment is submitted to amend the fol	lowing:		
. If amending name, enter the new name	of the limited liab	oility company here	१८७ जी
ALLURE MARKETING, LLC			
he new name must be distinguishable and contain the	words "Limited Liabi	ility Company," the desig	mation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		400 LESLIE DR, A	APT 422
		HALLANDALE B	EACH, FL 33009
			سنو است. دو دو
			, (m)
nter new mailing address, if applicable:		400 LESLIE DRIV	'E APT 422
(Mailing address MAY BE A POST OFFICE BOX)		HALLANDALE B	EACH, FL 33009
s. If amending the registered agent and egistered agent and/or the new registered of Name of New Registered Agent:	office address her		
	400 LESLIE D	PRIVE APT 422	
New Registered Office Address:			street address
•	HALLANDAI		Florida 33009
			, r ivi iua

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	CRUZALEGUI, LILIAM A	2001 BISCAYNE BLVD APT 261	
		MIAMI FL 33137	Remove
			□ Change
			Remove
			Change
			Remove
			Add Remove
			□ Remove
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ctive date, if other than the date of filing:	(optional)	
effective date is listed, the date must be specific and cannot be prior to ce: If the date inserted in this block does not meet the applicable ament's effective date on the Department of State's records.	date of filing or more than 90 days after filing.) Pursu e statutory filing requirements, this date will no	ant to 605 ot be liste
record specifies a delayed effective date, but not a ne 90th day after the record is filed.	an effective time, at 12:01 a.m. on th	e earlie
AUGUST 28 2015		
·d	•	
(Tileox		
	red epresentative of a member	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00