L15000053173

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
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(Bu	siness Entity Nar	me)
(Do	cument Number)	
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COVER LETTER

TO:	Registration Division of C		• .	~ · · · • · ·
CHDIE		eting Solutions LLC		<i>₽</i>
SUBJE	C1:	Name of Lim	ited Liability Company	
The end	closed Articles of	of Amendment and fee(s) are sub	emitted for filing.	
Please r	eturn all corres	pondence concerning this matter	to the following:	
		Carolyn Coke		
			Name of Person	* * *
		CC Marketing Solutions L	LLC	
			Firm/Company	
		P.O. Box 742623		
			Address	
		Boynton Beach, FL. 3347-	4	
		ccoke4@gmail.com	City/State and Zip Code	
			to be used for future annual rep	ort notification)
For furt	her information	concerning this matter, please c	all:	
Caroly	n Co ke		754 244-4 at ()	899
	Name	of Person		Daytime Telephone Number
Enclose	d is a check for	the following amount:		
□ \$ 25	i,00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclose	S60.00 Filing Fee, Certificate of Status & Certified Copy (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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CC Marketing Solutions LLC		$r_{ij}^{ij} > i_{ij}$, $r_{ij} = \frac{r_{ij} \cdot i_{ij}}{2\hat{y}} \cdot 2\hat{y}$
(Name of the Limited Liabil (A Florid	ity Company as it now appears on our re- a Limited Liability Company)	cords.) ALLAHASSEE FLORIO.
The Articles of Organization for this Limited Liability (Company were filed on March 25, 20	and assigned
Florida document number L15000053173	_ ·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
My Prime Essentials LLC		
The new name must be distinguishable and contain the words "Lin	nited 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 ADDI	RESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		
B. If amending the registered agent and/or registere	d office address on our records, <u>en</u>	ter the name of the new registered
agent and/or the new registered office address here:		
N. D. L. L.		
Name of New Registered Agent:		
New Registered Office Address:		· · · · · · · · · · · · · · · · · · ·
	Enter Florida street ad	dress
	,	Florida
	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 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>	Name	<u>Address</u>	222 OCT 19 PA 4: 20	Type of Action
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Effective date, if fan effective date is Note: If the date is locument's effecti	listed, the date must nserted in this blo	be specific and ck does not m	cannot be parest the p	plicable sta	of filing or mo tutory filing	re than 90 day	(optional) s after filing ts, this date	.) Pursuant to 605.
record specifies a d is filed.	delayed effective	date, but not	an effectiv	ve time, at 1	12:01 a.m. o	n the earlier	of: (b) Th	ne 90th day after
Dated October 10	-//		2020					
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