## L150000 67692

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## **COVER LETTER**

	egistration Se ivision of Cor		•		
SUBJECT		Marketing Group, LLC			
SOBOLOT	•	Name of Lim	ited Liability Company		
		Amendment and fee(s) are sub	_		
		Manuel Garcia			
			Name of Person	<del></del>	
Trademark Marketing Group, LLC					. <b>ಕ</b> ್
Firm/Company				<del></del>	5
		876 Ellen Drive			16 JUL -8 AMII: 39
Address					
		Key Largo, FL 33037			<b>:</b> :
			City/State and Zip Code		ယ္အ
		marketingsolutioning@yah	oo.com to be used for future annual report notif	(aution)	•
For further	information co	oncerning this matter, please c	·	ication)	
Manuel G	arcia		561 396-5302 at ( )		
	Name o	f Person		Telephone Number	
Enclosed is	s 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)	□ \$60.00 Filing Fee, Certificate of Stat Certified Copy (additional copy is end	

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

Trademark Marketing Group, LLC	
(Name of the Limited Lia (A Flo	bility Company as it now appears on our records.) rida Limited Liability Company)
The Articles of Organization for this Limited Liability Florida document number L15000067692	y Company were filed on 411/2015 and assigned
This amendment is submitted to amend the following	
A. If amending name, enter the new name of the l	imited liability company here:
The new name must be distinguishable and contain the words "I	Limited Liability Company," the designation "LLC" or the abbreviation "LLC"
Enter new principal offices address, if applicable:	LARE
(Principal office address MUST BE A STREET AD	
	ر المراق الم
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	9 200
	<del></del>
B. If amending the registered agent and/or re registered agent and/or the new registered office a	gistered office address on our records, enter the name of the new ddress here:
Name of New Registered Agent:	
New Registered Office Address:	,
	Enter Florida street address
	, 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 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
AMBR	Maria Perez-Forte	1661 SW 106 Terrace, Davie, FL 3	Add
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The Soul day a	ter the recor	u is ilieu.					
May 5,		2	2016				
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Typed or printed name of signee

Filing Fee: \$25.00