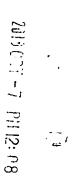
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# **COVER LETTER**

TO:	Registration Sec Division of Corp			√ *			
CHDI	ret.	MARCO Federal Services 1	LC				
SUBJ	ECT:	Name of Limited Liability Company					
The e	nclosed Articles of A	Amendment and fee(s) are subt	nitted for filing.				
Pleaso	e return all correspor	idence concerning this matter t	o the following:				
		Juan A Marrero-Santiago					
			Name of Person				
		MARCO Federal Services	LLC				
			Firm/Company	<u> </u>			
		400 Emmett St					
			Address	<u> </u>			
1		Kissimmee, FL 34741					
			City/State and Zip Code				
		admin@marcofederal.com					
		E-mail address: ()	to be used for future annual report noti	fication)			
For fu	inther information co	oncerning this matter, please ca	ıll:				
Juan	Marrero Santiago		407 286-7529				
	Name of	Person	at () Atea Code Daytim	e Telephone Number			
Enclo	sed is a check for th	c following amount:					
<b>■</b> \$	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. Centificate of Status & Centified Copy (additional 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

MARCO FEDERAL SEVICES, LLC
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(Name of the Limited Liability Company as it now appears on our re-(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on <u>January 5</u>, 2016 Florida document number L16000003137 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: MARCO Federal Services, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 400 Emmett St Enter new principal offices address, if applicable: Kissimmee, FL 34741 (Principal office address MUST BE A STREET ADDRESS) 400 Emmett St Enter new mailing address, if applicable: Kissimmee, FL 34741 (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: Juan A Marrero-Santiago Name of New Registered Agent: 400 Emmett St New Registered Office Address: Enter Florida street address Kissimmee \_, Florida <sup>34741</sup> 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.

f Changing Registered Agent, Signature of New Registered Agent

Page  $\overline{1}$  of 3

. 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	Juan A Marrero-Santiago	400 Emmett St Kissimmee, FL 34741	<b>∃</b> Add
		111 E. Monument Ave. Stc. 401 Kissimmee, FL 34741	Remove
			□ Change
AMBR	James Cordova	400 Emmett St Kissimmee, FL 34741	■ Add
			Remove
			☐ Change
			Add
			□ Remove
			Change
	·		Add
			Remove
			☐ Change
			Remove
			☐ Change
			Add
			☐ Remove
			☐ Clunge

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Effective date, if other than If an effective date is listed, the date Note: If the date inserted in the document's effective date on the	e must be specific and cannot be is block does not meet the a	applicable statutory fil	(optional) more than 90 days after filing ing requirements, this date	2.) Pursuant to 605.0207
ne record specifies a dela The 90th day after the	ayed effective date, burecord is filed.	ut not an effective	time, at 12:01 a.m.	on the earlier of
Dated	2019			
	- Lus			
	Signature of a member c	or authorized representati	ve of a member	<del></del>

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00