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L160000 05341

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

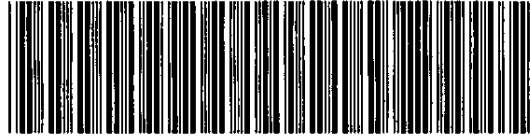
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

627  
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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 21, 2016

JONATHAN KOESER  
475 NE 1ST STREET SUITE C  
DELRAY BEACH, FL 33483

SUBJECT: TARGETED PERFORMANCE MARKETING LLC  
Ref. Number: L16000005341

We have received your document for TARGETED PERFORMANCE MARKETING LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1)(b), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

The registered agent must sign accepting the designation.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Justin M Shivers  
Regulatory Specialist III  
Registration/Qualification Section

Letter Number: 516A00005693

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** REMOVING AGENTS FROM LLC  
\_\_\_\_\_

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

JONATHAN R. KOESER

\_\_\_\_\_  
Name of Person

TARGETED PERFORMANCE MARKETING LLC

\_\_\_\_\_  
Firm/Company

475 NE 1<sup>ST</sup> STREET SUITE C

\_\_\_\_\_  
Address

DELRAY BEACH, FL 33483

\_\_\_\_\_  
City/State and Zip Code

~~E-mail address: (to be used for future annual report notification)~~

For further information concerning this matter, please call:

JONATHAN R. KOESER

Name of Person

At

561-693-7699

Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**Enclosed is a check for the following amount:**

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

TARGETED PERFORMANCE MARKETING LLC

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

The Articles of Organization for this Limited Liability Company were filed on JANUARY 07, 2016 and assigned  
Florida document number L16000005341.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and contain the words "Limited 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 ADDRESS)

Enter new mailing address, if applicable:

(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:**

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

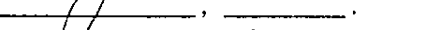
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	GARDNER, ROBERT	836 NW 3rd Ave	<input type="checkbox"/> Add
		DELRAY BEACH, FL 33444	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	GARDNER, MOLLY	836 NW 3rd Ave	<input type="checkbox"/> Add
		DELRAY BEACH, FL 33444	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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Dated JULY 12, 2016

LY 12 \_\_\_\_\_, 2016 \_\_\_\_\_

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member

JONATHAN KOESER

\_\_\_\_\_  
Typed or printed name of signee