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COVER LETTER

T	D: Registration Se Division of Cor	
		ARKETING GROUP, LLC
St	JBJECT:	Name of Limited Liability Company
Tì	ne enclosed Articles of	Amendment and fee(s) are submitted for filing.
Pl	ease return all correspo	ondence concerning this matter to the following:
		Stephanie E. Petta
		Name of Person
		PETTA MARKETING GROUP, LLC
		Firm/Company
		2804 65th Street East
		Address
		Bradenton, FL 34208
		City/State and Zip Code
		stephanie.petta@hotmail.com E-mail address: (to be used for future annual report notification)
Fo	or further information c	oncerning this matter, please call:
	Name o	f Person Area Code Daytime Telephone Number
Eı	sclosed is a check for th	ne following amount:
	\$25.00 Filing Fee	□ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certified 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

ompany as it now appears on our records. nited Liability Company))
pany were filed on 02/23/2016	and assigned
liability company here:	
Liability Company," the designation "LLC"	or the abbreviation "L.L.C."
<u>s</u>	
	55.50
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ed office address on our records, here:	enter the name of the ne
Fator Cloude start address	•
Enter r torida street adaress	
City, Flor	rida
	Liability Company," the designation "LLC" S) ed office address on our records, here: Enter Florida street address , Florida street address

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
AMBR	Stephanie E. Petta	2804 65th St E	Add
		Bradenton, FL 34208	Remove
		······································	☐ Change
			□ Add
			☐ Remove
			☐ Change
			D Add
			□ Remove
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		THE STATE OF STREET, STATE OF	□ Remove
			☐ Change
			☐ Remove
			[] Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if ne	cessary.)	
	· · ·	

Operative date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days aft Note: If the date inserted in this block does not meet the applicable statutory filing requirements, the document's effective date on the Department of State's records.	tional) ter filing.) Pursuant to 605.0 nis date will not be listed	207 (3) as the
the record specifies a delayed effective date, but not an effective time, at 12:01) The 90th day after the record is filed.		of:
Dated 02/24 2016	16 F SECH FALL	all of the s
The state of the s	EB 29 RETAN AHASS	412724
Signature of a member of authorized representative of a member	<u> </u>	i Ti
Joseph Petta, MGR	3: 3 STA	

Page 3 of 3

Filing Fee: \$25.00