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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : MARLOWE & WEATHERFORD, P.A.

Account Number : I20020000088 Phone : (407)629-5008

Phone : (407)629-5008 Fax Number : (407)740-0310

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

mail Address: KKInchla Oct 1.11

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MARJE DOS, LLC

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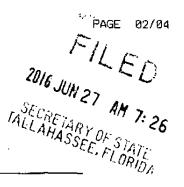
K.SALY EXAMINER

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Corporate Filing Menu

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Marie Dos 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 May 20, 2016 __ and assigned 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 "LLC." 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 _

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.

City

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

Title	<u>Name</u>	Address	Type of Action
mgr	Alicia M. Sweeney	311 Santiago Drive	☐ Add
		Winter Fark, Florida 32798	■ Remove
			☐ Change
MGR	Kathy Kinchla	728 Hardman Drive	= Add
		Orlando, FL 32806	□ Remove
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ne record specifies a delayed effective date, but The 90th day after the record is filed.	not an effective time, at 12:01 a.m. on the earl	ier of:
Dated June 25 2016	<u> </u>	
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Page 3 of 3

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