L16000140510

(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phon	e #)
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(Bu	siness Entity Nar	ne)
(Do	cument Number)	<u></u>
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SECRETARY OF STATE

D. SCOTT 0 6 2016

COVER LETTER

TO:	Registration Division of C		·	•	
SUBJE	Off 18th	Marketing LLC.			
SUBJE					
he enc	losed Articles	of Amendment and fee(s) are sub	emitted for filing.		
Flease r	eturn all corres	spondence concerning this matter	to the following:		
		Daniel Uphin	·		
			Name of Person		-
		Off 18th Marketing LLC			
			Firm/Company		-
		10 FAirway dr. Ste 100			
			Address		-
		Deerfield Beach FL 33441			
		d.upbin@unitedslprocessing	-		TALL TALL
		E-mail address: (to be used for future annual	report notification)	
or furil	her information	n concerning this matter, please c	all:		CT -4 A
Daniel 3	Jpbin		516 859	97184	MI II: 3
	Nam	e of Person	Area Code	Daytime Telephone Number	# 31 # 31
Enclos	d is weheck for	r the following amount:			
屬 \$2 5.	.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enc	Certifica (losed) Certifica	te of Status &
1	Regi Divi P.O.	ILING ADDRESS: stration Section sion of Corporations Box 6327 ahassee, FL 32314	Registrat Division Clifton B	DICOURIER ADDRESS: ion Section of Corporations suilding centive Center Circle	

Division of Corporations Clifton Building 2661 Executive Center Circle Tallatiassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Off 18th Marketing LLC.	
(<u>Name of the Limited L</u> (A l	Jability Company as it now appears on our records.) Florida Limited Liability Company)
The Articles of Organization for this Limited Liabi Florida document number L16000140510	lity Company were filed on 07/26/2016 and assigned
Florida document number	·
This ar endment is submitted to amend the following	ng:
A. If amending name, enter the new name of the	e 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."
Inter new principal offices address, if applicable	e:
(Principal office address MUST BE A STREET A	(DDRESS)
Enter new mailing address, if applicable:	
(Maili 19 address MAY BE A POST OFFICE BO	<u> </u>
	<u> </u>
	registered office address on our records, enter the name of the
registered agent and/or the new registered office	address nere:
Name of Name Background Association	
Name of New Registered Agent:	
New Registered Office Address:	SA ω
	Enter Florida strect address
	, Florida
	Carr Zan Chac

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 fled to merely reflect a change in the registered office address, I hereby confirm that the limited liability company was 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; emoved from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Patrick O'Deady	10 Fairway Dr. Ste 100	
		deerfield Beach, FL 33486	□ Remove
			Change
			□ Add
			□ Remove
			☐ Change
			Add
			☐ Remove
			Chappie
			Add T
			P.Remove 记公 记Change
	ATT TI - A TO		
			Remove
		For the first of the second se	Change
	· · · · · · · · · · · · · · · · · · ·		Add
			□ Remove
			□ Change

				260
				- <u> </u>
ective date, if other than the effective date is listed, the date mus	date of filing:		(o _l	otional)
te: If the date inserted in this bloom	ock does not meet the	applicable statutory	g or more than 90 days a / filing requirements,	ther filing.) Pursuant to 605.02 this date will not be listed
ument's effective date on the Do	partment of State's re	cords.		
record specifies a delayed	effective date h	it not an offoct	ivo timo at 13:0	1 am on the carlier
ne 90th day after the reco		ut not an enect	ive time, at 12.0	a.m. on the earner
Santambar 20	2016			
ed September 30	2016	*		

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Filing Fee: \$25.00