L17000119136

(R	equestor's Name)	
(A	ddress)	
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(C	ity/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Nan	ne)
(D	ocument Number)	
Certified Copies	Certificates	of Status
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R. WHITE DEC 19 IUS 2015 0 TO 19 PH 1:31



December 7, 2019

JUDAH TURYANA 8128 FRONT BEACH RD STE C PANAMA CITY BEACH, FL 32407

SUBJECT: EDGE DIGITAL MARKETING SOLUTIONS AND STRATEGIES, LLC

Ref. Number: L17000119136

We have received your document for EDGE DIGITAL MARKETING SOLUTIONS AND STRATEGIES, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

The name of a limited liability company must contain the designation "L.L.C.," "LLC," or the words "LIMITED LIABILITY COMPANY." Please amend the name of your entity accordingly.

Please return 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) 245-6050.

Rebekah White Regulatory Specialist II Supervisor

Letter Number: 519A00024841

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www.sunbiz.org

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: Edge	Digital Marketing Solutions and Strategie
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are	submitted for filing.
Please return all correspondence concerning this	matter to the following:
\ (1 T. ()
<u></u>	Name of Contact Person
E	Edge Digitul Agency Firm/ Company
	Front Beach Road Shite C
Panana C	City/ State and Zip Code
E-mail address: (to be For further information concerning this matter, pl	used for future annual report-notification)
For further information concerning this matter, pr	icase can.
Name of Contact Person	at (\$\color \color \co
Enclosed is a check for the following amount made	de payable to the Florida Department of State:
■ \$35 Filing Fee & Certificate of Status	-
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Street Address Amendment Section Division of Corporations Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

~??!! C C ~ \ . .

(Name of the Limited Liability Company (A Florida Limited Lia	y as it now appears on our records.) ability Company)
The Articles of Organization for this Limited Liability Company w	<u>,</u>
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability Edge Digital Agency LLC. The new name must be distinguishable and contain the words "Limited Liability	
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 ad agent and/or the new registered office address here:	ldress on our records, enter the name of the new registered
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.

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>	Address	Type of Action
			□Add
			□Remove
		<u> </u>	□ Change
			□Add
			□Remove
			Change
			Add
			Remove
			□Change
			□ Remove
			□Change
			
			□Remove
			Change
			Remove
			□ Change

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Note	tive date, if other than the date of filing:
he reco	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the filed.
Date	,
Date	·
	Signature of a member or authorized representative of a member

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