L17000187158

(Requestor's Name)
(Address)
(Address)
·
(City/State/Zip/Phone #)
(City/State/Zip/Filone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(
Cartificat Caning Cartificates of Status
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



000305394070

11/14/17--01045--008 **25.00

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: CYB Marketing Solutions, LLC
Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Chantal Forster Name of Person
CYB Marketing Solutions, LLC
561 Royal Palm Way
Address
Davie, FL. 33325
CFOYSTEY OCYDMAYKETINGSOLUTIONS.COM E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Chantal Forster at (954) 73 Ce -765 1 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
S25.00 Filing Fee Scrifficate of Status Certified Copy (additional copy is enclosed) S60.00 Filing Fee. Certificate of Status 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**

(Kame of the Limited Liability Compar (A Florida Limited L	
The Articles of Organization for this Limited Liability Company Florida document number <u>L17000187158</u> .	$\Delta 1.1.7$
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	lity company here:
The new name must be distinguishable and contain the words "Limited Liabilite Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	THE ONLY 4th Street #307 Plantation FL. 33317
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	7450 N.W. 4+n Street #307 Plantation, FL. 33317
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here	fice address on our records, <u>enter the name of the new</u>
Name of New Registered Agent:	
New Registered Office Address: 4450	N.W. 4th Street 1000 #30+
Planto	Florida 33317
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.

7

2

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>	Name	Address	Type of Action
President	Felicia Forster	SUI Royal Palm Way	
m	GR	Sar Royal Palm Way Davic, FL. 33325	Remove
			Change
			□ Remove
			□ Change
			□_Add
			Remove
			Change
			(S) (S) [] Add
			□ Remove
			Change
			Add
			□ Remove
			Change
			Add
			□ Remove
			□ Change

,	
	17
	; * * * * * * * * * * * * * * * * * * *
	=======================================
	<u></u>
ctive date, if other than the date of filing:	. දිනි (optional)
effective date is listed, the date must be specific and cannot be prior to date of filing or more. If the date inserted in this block does not meet the applicable statutory filing rement's effective date on the Department of State's records.	than 90 days after filing.) Pursuant to 605.0
ecord specifies a delayed effective date, but not an effective time 90th day after the record is filed.	ne, at 12:01 a.m. on the earlier
11/7/17	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00