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COVER LETTER

TO: Registration Division of O	Section Corporations		
SUBJECT:	larketing arx	at Support Lited Liability Company	LC
The enclosed Articles	of Amendment and fee(s) are sub-	mitted for filing.	
Please return all corre	spondence concerning this matter	to the following:	
	Arlette ?	Name of Person	
	Marketin	ng and Suppo	1+ LC
	0571 Ar	tagon blud c	1pt 41Z
	SURISE	FL 333 City/State and Zip Code	<u> </u>
	arlettema.	o be used for future-annual report noti	CO M
For further informatio	n concerning this matter, please ca	ill:	
Aylette	S HARIA	at (754) 26 Area Code Daytim	4 29 15 e Telephone Number
Enclosed is a check for	r the following amount:		
□ \$25.00 Filing Fee	DE \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 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
Clitton Building
2661 Executive Center Circle
Tallahassee, FL 32301

TO

ARTICLES OF ORGANIZATION **OF**

MARKETING and.	SUPPORT LLC
(Name of the Limited Liability Compa (A Florida Limited	ny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number 1800 00 198.23	were filed on <u>Jan 99, 90 K</u> und assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	20 20 20 20 20 20 20 20 20 20 20 20 20 2
	N/A S
Enter new mailing address, if applicable:	5
(Mailing address MAY BE A POST OFFICE BOX)	
	NA
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her	
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, FloridaZip Code
New Registered Agent's Signature, if changing Registered Agent-	an the

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with 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.

'<u>or removed from our records</u>:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
	N/A		
			Remove
	1		Change
	N/A		□ Add
			□ Remove
			☐ Change
	N/A		—————————————————————————————————————
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	10	-	Add
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Marketing and Support LLC
L18000019828 15 a company
that recknits. I am a Corporate
Revaulter Tts income corres from
rectuiting for the company.
Its affine activity is recurrent and
world/support as the name says. The company does not self
Company does not selp

<u> </u>
E. Effective date, if other than the date of filing: 100 00 00 (optional)
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a document's effective date on the Department of State's records.
aveament's effective date on the Department of State's records.
f the record 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 record is filed.
Dic 18 2019
Dated Aug 18 2019.
Signature of a member or authorized representative of a member
(A To A Marin
Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00