L18000229476

(Re	questor's Name)	
(Ad	dress)	
———(Ad	dress)	
(Cit	y/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
	-in Fakka Nama	
(Bu	siness Entity Name)	
(Do	cument Number)	
Certified Copies	_ Certificates of	Status
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COVER LETTER

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SHR IFC		Marketing, LLC		
ODJEC	,1. <u> </u>	Name of Lim	ited Liability Company	
The encl	osed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please re	turn all correspo	ondence concerning this matter	to the following:	
		Jonathan McAlfister		
Please return all correspondence concerning this mate Jonathan McAllister Statewide Marketing, LL: Merritt Island, FL 32953 John@honey2do.com	Name of Person			
	Statewide Marketing, LLC			
			Firm/Company	
		381 Hibiscus Ave		
			Address	
		Name of Limited Liability Company If Amendment and fee(s) are submitted for filing. Fondence concerning this matter to the following: Jonathan McAllister Name of Person Statewide Marketing, LLC Firm/Company 381 Hibiscus Ave Address Merritt Island, FL 32953 City/State and Zip Code John@honey2do.com E-mail address: (to be used for future annual report notification) concerning this matter, please call: at (
		John@honey2do.com	City/State and Zip Code	
		E-mail address: (to be used for future annual report notifi	cation)
For furth	er information c	concerning this matter, please ca	all:	
John M e	cAllister			
	Name o	of Person		Telephone Number
Enclosed	l is a check for the	he following amount:		,
□ \$ 25.0	00 Filing Fee		Certified Copy	Section Sectin Section Section Section Section Section Section Section Section

MAILING ADDRESS:

TO:

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 ORGANIZATION OF

(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our rec Liability Company)	ords.)	
The Articles of Organization for this Limited Liability Company Florida document number L18000229476	were filed on 9/27/18	and 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 Liabil	lity Company," the designation "l	.L.C" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	381 Hibiscus Ave.		
Principal office address MUST BE A STREET ADDRESS)	Merritt Island, FL 32953		
Enter new mailing address, if applicable:	381 Hibiscus Ave.		
nter new mailing address, if applicable: **Initial Control of the Initial Control of the I	Merritt Island, FL 32953		
3. If amending the registered agent and/or registered of registered agent and/or the new registered office address here Name of New Registered Agent: New Registered Office Address:			
		Florida	
	City	Zip Code	

New Registered Agent's Signature, if changing Registered Agent:

Statewide Marketing, LLC

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

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Jonathan McAllister	381 Hibiscus Ave Merritt Island, FL 32953	DAdd
			Remove
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Effecti	ive date, if other th	an the date of fili	ng•		(opti	ional)	
t'an effi Note:	ective date is listed, the If the date inserted is tent's effective date (date must be specific a n this block does not	ind cannot be prior t t meet the applica	o date of filing or m	ore than 90 days afte	r filing.) Pursuant to 60	05.0207 ited as t
e red	cord specifies a c 90th day after t	lelayed effective	date, but not	an effective t	ime, at 12:01	a.m. on the earl	ier of
me	Journay arter t	ne record is filed	A •				
	04-29		. 2019	·			
Dated		,	n -	7 *-			
Dated	6			rized representative			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00