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COVER LETTER

un incom	Four Market	iers		
SUBJECT:		Name of Limi	ted Liability Company	
The enclosed	d Articles of A	Amendment and fee(s) are subr	nitted for filing.	
Please return	all correspor	dence concerning this matter t	to the following:	
		Chris Peterson		
		3 Marketiers	Name of Person	
		1415 Brumley Road	Firm/Company	
		Chuluota Florida 32766	Address	
		petersonucc@yahoo.com	City/State and Zip Code	antion)
For further i	nformation co	email address: (to oncerning this matter, please ca		eactor)
Chris Peters	son		407 625-9066 at ()	
	Name of	Person	Area Code Daytime	Telephone Number
Enclosed is	a check for th	e following amount:		
□ \$25.00 I	Filing Fee	■ \$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:

TO:

Registration Section Division of Corporations

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

Four Marketiers	• · ·
	Liability Company) 2019 1011
The Articles of Organization for this Limited Liability Company	were filed on January 14, 2019 and assigned
lorida document number L19000013957	A. A. A. A. B. W. C. C. C. C.
his amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
Marketiers, LLC	
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "L.L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1415 Brumley Road
Principal office address MUST BE A STREET ADDRESS)	Chuluota, Florida
Thirtipal office www.coc.n.co.	32766
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX) 3. If amending the registered agent and/or registered o	
egistered agent and/or the new registered office address her	<u>e</u> .
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
	City Zip Code

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 ad or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
VP	Evan Trumbull		
		4408 NW 29th Street Gainesville, Fl 32605	Remove
			Change
Sec	Steve Cedrone		
		4408 NW 29th Street Gainesville, Fl 32605	Remove
	POWER STATE AND STATE OF THE ST		Change
Treas	Bill Kilichowski		Add
		4408 NW 29th Street Gainesville, Fl 32605	Remove
			☐ Change
VP	Ryan Forrester	1415 Brumley Road Chuluota, Fl 32766	
			☐ Remove
			Change
			Add
			☐ Remove
			☐ Change
			Add
			☐ Remove
			Change

Liffon	tive date, if other than the date of filing: (optional)
(If an e	Tective 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 605.0207 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as nent's effective date on the Department of State's records.
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of e 90th day after the record is filed.
Dated	MAY 3074 2019.

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00