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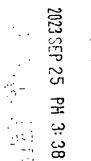
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COVER LETTER

	egistration Sec vision of Corp		Sec.	
SURIFCT	. M2 PROMO	OTIONS, LLC	·	
300ALC1	•	Name of Lim	ited Liability Company	
The enclose	ed Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please retu	n all correspor	ndence concerning this matter	to the following:	
		DONALD MOSS		
			Name of Person	
		M2 PROMOTIONS, LLC		
			Firm/Company	
		4400 38TH ST S		
			Address	
		ST. PETERSBURG, FL 3:	3711	
			City/State and Zip Code	
		donmoss@m2promo.com		· <u>·</u>
		E-mail address: (to be used for future annual report notif	lication)
For further	information co	oncerning this matter, please ca	all:	
Donald Mo	oss		at (317) 695-8600	
	Name of	Person	Area Code Daytimo	e Telephone Number
Enclosed is	a check for th	e following amount:		
■ \$25.00	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)
			Course Address	

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

M2 PROMOTIONS, LLC		;	
(<u>Name of the Limited Liability</u> (A Florida L	Company as it now appears on our reimited Liability Company)	ecords.)	
The Articles of Organization for this Limited Liability Cor	mpany were filed on 01/22/2019	an	d assigned
Florida document number L19000023014	,		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limite	ed liability company here:		
The new name must be distinguishable and contain the words "Limite	d Liability Company," the designation	"LLC" or the abbreviation	on "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRE	<u>(SS)</u>		
-	·		
		(023 SE	
Enter new mailing address, if applicable:		S	***
(Mailing address MAY BE A POST OFFICE BOX)		\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
		- i ω	
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	office address on our records, <u>e</u>	nter the name of th	e new registere
Name of New Registered Agent:			
New Registered Office Address:		····	
	Enter Florida street c	address	
		_, Florida	
	City	Zip (Lode

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 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
AMBR	MOSS, DONALD E	4400 38TH ST S	□Add
		ST, PETERSBURG, FL 33711	Remove
			□Change
MGR	MOSS, DONALD E	4400 38TH ST S	Add
		ST. PETERSBURG, FL 33711	□Remove
			Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□ Change
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		□ Remove	
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	•	□Add	
		□Remove	
			□ Change

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Effect	ive date, if other than the date of filing:
	fective 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.
ne reco ord is f	rd 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
Dotad	Sptember 18. 2023. Donald More Signature of a member or authorized representative of a member
Dateu	Signature . The same same same same same same same sam
	Von IlMore
	Signature of a member or authorized representative of a member
	DONALD E. MOSS Typed or printed name of signee

Filing Fee: \$25.00