L200000 12919

(Requestor's Name	·)
(Address)	
(Address)	
(City/State/Zip/Pho	ne #)
PICK-UP WAIT	MAIL
(Business Entity Na	ame)
(Document Numbe	r)
Certified Copies Certificate	es of Status
Special Instructions to Filing Officer:	

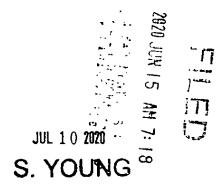
Office Use Only



300346093283

OB/16/20-+01007--022 +*25.00

RECEIVED
JUN 1 5 2020



ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

3

Independent Marketing Enterprise LLC	T
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)	5 7
The Articles of Organization for this Limited Liability Company were filed on	and assigned
This amendment is submitted to amend the following:	O
A. If amending name, enter the new name of the limited liability company here:	
The new name must be distinguishable and contain the words "Limited Liability 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)	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office address on our records, enter the agent and/or the new registered office address here:	name of the new registered
Name of New Registered Agent:	
New Registered Office Address: Enter Florida street address	
. Florid	a
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 added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Bosco G. Zambrano	3411 Jamais wood way, Tampa, Florida 33618	BAdd
			□Remove
			□Change
MGR	Isabel Cristina Torres	3411 Jamais Wood Way, Tampa, Florida 33618	≣ ∧dd
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			□Change
		· · · · · · · · · · · · · · · · · · ·	□Add
			□Remove
			MChange

			• •			•	
							
				·			
			 				
				· · · · · · · · · · · · · · · · · · ·		<u></u>	
			*1, 1 *				
				 			
					 		
				· · · ·			
-				······································			
-		· · · · · ·			<u> </u>		

				· · · · · · · · · · · · · · · · · · ·			
	. <u>.</u>						
			* • • • • • • • • • • • • • • • • • • •	·····			
effective date is : If the date	f other than the i listed, the date mus inserted in this ble live date on the De	t be specific and ca ock does not mee	unnot be prior to et the applicab	date of filing or r	nore than 90 days	after filing.) Purs	nuant to 605.020 not be listed a
ord specifies filed.	a delayed effectiv	e date, but not ar	n effective tim	e, at 12:01 a.m.	on the earlier (of: (b) The 90t	h day after th
d			//}	. •			
	(a/11,	. A	#				
·	Trans	Signature of a me	mber or authori	zed representativ	e of a member		
	1	<u>~</u>					

Filing Fee: \$25.00