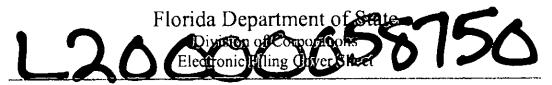
6/7/22, 6:46 AM

To:

Division of Corporations



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name ; LEGALZOOM.COM INC.

Account Number : I20010000062 Phone : (323)962-8600 Fax Number : (323)962-3889

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MARS INDUSTRIES LLC

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JUN - 7 2022

COVER LETTER

TO: Registration Se Division of Cor	ction porations &	.	•
•	OUSTRIES LLC		•
SUBJECT:	Name of Limit	ed Liability Company	
The enclosed Articles of	Amendment and fee(s) are subm	nitted for filing.	
Please return all correspon	ndence concerning this matter to	o the following:	
	Cheyenne Moseley		
		Name of Person	
	Firm/Company		
	101 N Brand Blvd 11th Fl		
		Address	
	Glendale, CA 91203		
		City/State and Zip Code	
	markakadon@gmail.com		
	E-mail address: (t	o be used for future annual report notific	ation)
For further information co	neeming this matter, please ca	dl:	
Cheyenne Moseley		800 773-0888 at ()	
Name of	Person	Area Code Daytime	Felephone 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)

MAILING ADDRESS: 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

ny as it now appears on our records.) Liability Company)			
were filed on 02/21/2020 and assigned			
ility company here:			
lity Company," the designation "LLC" or the abbreviation "L.L.C."			
17947 SW 30th Ct.			
Miramar, FL 33029			
17947 SW 30th Ct. Miramar, FL 33029			
ffice address on our records, enter the name of the name:			
77			
Enter Florida street address			
City Florida City Cade			

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

MGR = Manager

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

LegalZoom.com, Inc.

AMBR = A	Authorized Member	and the second second second second	
Title	Name	Address	Type of Action
AMBR	RAMIREZ, MARK ANTHONY		O Add
			☐ Remove
		17947 SW 30th Ct. Miramar, FL 33029	■ Change
	•		D Add
	•	<u> </u>	□ Remove
			Change
			D Add
			□ Remove
			Add
			□ Remove
			☐ Change
			□ Remove
			□ Change
			Add
			☐ Remove
			☐ Change

	Page: 6 of 6	2022-06-07 04:48:29 PDT	LegalZoom.com, Inc.	From: Laura Rodrig
D. If	amending any other inform	nation, enter change(s) here: (Attach	additional sheets, if necessary.)	
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(lf an eff	fective date is listed, the date mus	date of filing: the specific and cannot be prior to date of filing	g or more than 90 days after filing.) Pursuar	at to 605.0207 (3)(b)
Note:	If the date inserted in this blo sent's effective date on the De	ock does not meet the applicable statutory	filing requirements, this date will not	be listed as the
uucun.	icht 3 theetive date on die ex	partition of State 9 records.		
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	ford specifies a delayed 90th day after the reco	effective date, but not an effect ord is filed.	ive time, at 12.01 a.m. on the	. earner Vr.
D	Mau 1	10th, 2022.		
Dated_	1	, <u>2</u>		
	V	110		
		signature of a member or authorized represen	talive of a member	
	~			
	Mark Anthony Ramirez			
		Typed or printed name of sign	iee	

Page 3 of 3

Filing Fee: \$25.00