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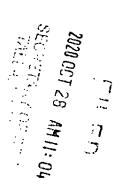
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COVER LETTER

TO:	Registration S Division of Co			
SUBJEC	MARKET	ING CREATIVO PROYECTA	. LLC	
SUBJEC		Name of Limi	ted Liability Company	
The encl	osed Articles of	Amendment and fee(s) are sub-	nitted for filing.	
Please re	turn all corresp	ondence concerning this matter t	o the following:	
		YAZCEMINNE PERDOM	O	
			Name of Person	· · · · · · · · · · · · · · · · · · ·
		MARKETING CREATIVE	PROYECTA , LLC	
			Firm/Company	
		4707 N HERMITAGE AVI	E#1	
			Address	
		CHICAGO, IL. 60640-4416	5	
		NIFO O CO	City/State and Zip Code	
		INFO@COAASSOCIATES	.COM o be used for future annual report not	ticaron)
For furth	er information c	concerning this matter, please ca	·	
ANTON	IO COA		561 814-4558	
	Name o	of Person	at ()	ne Telephone Number
Enclosed	l is a check for t	he following amount:		
■ \$25.0	00 Filing Fee	☐ \$30,00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Addre		<u>Street Address:</u> Registration Se	ortion
	Division of C		Registration Se Division of Cor	
	P.O. Box 632		The Centre of T	

Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MARKETING CREATIVO PROYECTA , LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on 04/08/2020	and assigned
Florida document number L20000099230		
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited liab</u>	oility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	4707 N HERMITAGE AVE # 1	<u> </u>
Principal office address MUST BE A STREET ADDRESS)	CHICAGO, IL. 60640-4416	1020 C
		<u> </u>
		22 22
Enter new mailing address, if applicable:		<u> </u>
Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
		<u> </u>
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the</u>	name of the new registe
Name of New Registered Agent:		· · · · · · · · · · · · · · · · · · ·
New Registered Office Address:	· · · · · · · · · · · · · · · · · · ·	
	Enter Florida street address	
	, Florid	
	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

Title	<u>Name</u>	<u>Address</u>	Type of Action
MGR	YAZCEMINNE PERDOMO	4707 N HERMITAGE AVE # 1	= Add
		CHICAGO, IL. 60640-4416	□Remove
			□Change
MGR	MENDOZA, ROSSANA A	4707 N HERMITAGE AVE # 1	🗀 Add
	CHICAGO, IL., 60640-4416	-	
			[]Change
MGR	BURGOS, JESUS	4707 N HERMITAGE AVE # 1	
	CHICAGO, IL. 60640-4416	■Remove	
		□Change	
			UAdd
		□Remove	
			Change
	-	□Add	
		⊐Remove	
			□Change
			□Add
			□Remove
			[] Change

Page 2 of 3

Note:	tive date, if other than the date of filing: (optional) feetive 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 ment's effective date on the Department of State's records.
the re	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of each day after the record is filed.
Dated	October 19 1 2020
	Signature of a member or authorized representative of a member
	YAZCEMINNE PERDOMO
	A C . TO CAPUTE A EA LA TEST PARTE P

Filing Fee: \$25.00