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COVER LETTER

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TO:

TO: Registration S Division of Co				
FIREHOT	MARKETING LLC			
SUBJECT:	Name of Lin	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all corresp	ondence concerning this matter	to the following:		
	Carlos Orellano			
		Name of Person		
	ZenBusiness INC			
		Firm/Company		
	336 E. College Ave Suite	301		
		Address		
	Tallahassee, FL 32301			
	- · · · · · · · · · · · · · · · · · · ·	City/State and Zip Code		
	fulfillment@zenbusiness.co			
	E-mail address: (to be used for future annual report not	iffication)	
For further information (concerning this matter, please c	all:		
Carlos C/O ZenBusiness, Inc.		844 493-6249		
Name	of Person		ne Telephone Number	
Enclosed is a check for t	he 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 Addre Registration		<u>Street Address:</u> Registration Se	ection	
Division of C		-	Division of Corporations	
P.O. Box 632		The Centre of	Tallahassee	
Tallahassee,	FL 32314	2415 N. Monro	oe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FIREHOT MARKETING LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\frac{2020-06-02}{1}$ and assigned Florida document number <u>L2000</u>0150033 This amendment is submitted to amend the following: 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 "LLC," 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 name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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.

City

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

Title	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			Change
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te: If the date inserted in this	ne date of filing:nust be specific and cannot be prior to block does not meet the applical Department of State's records.	o date of filing or more than 90 da ble statutory filing requiremen	(optional) ys after filing.) Pursuant to 605.020 nts, this date will not be listed as
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cord specifies a delayed effec	tive date, but not an effective tim	ie, at 12.01 a.m. on the carre	r of: (b) The 90th day after the
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ecord specifies a delayed effectis filed.	. 2023	_•	

Filing Fee: \$25.00