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COVER LETTER

Registration Section

TO:

Division of Corp	porations			
	Marma	are LLC		
SUBJECT:	Name of Limi	ted Liability Company		
	Amendment and fee(s) are submedence concerning this matter t			
·	ū	Marcel Perez		
		Name of Person		
		Marcel Perez	2020 JUL -7	T:
		Firm/Company		جنجد و حوموسیم
		1937 NW 33rd Street	7 PM 3: 4	
		Address	<u> </u>	السي
		Miami, FL 331412	5 5 5	
		City/State and Zip Code		
	Marmarcapp@	=		
	E-mail address: (t	o be used for future annual report not	ification)	
For further information co	oncerning this matter, please ca	11:		
Marcel Perez	:	786 564-0854	;	
Name of	Person	Area Code Daytin	ne Telephone Number	
Enclosed is a check for th	e following amount:			
□ \$25.00 Filing Fee		■ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed	
Mailing Address Registration S Division of C P.O. Box 632	ection orporations 7	Street Address: Registration Se Division of Co The Centre of	rporations Fallahassee	
Tallahassee, F	°L 32314	2415 N. Monro Tallahassee, FI	pe Street, Suite 810 L 32303	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Marmarc LLC		
(Name of the Limited Liability Company as it now as (A Florida Limited Liability Compa	opears on our records.) my)	
The Articles of Organization for this Limited Liability Company were filed or Florida document numberL20000166595	1 June 17, 2020	_ and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability compan	y here:	
Marmarc Appraisals LLC		
The new name must be distinguishable and contain the words "Limited Liability Company."	the designation "LLC" or the abbre-	viation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		<u>></u>
		3
San and a salar sa	(e);	-1 :·
Enter new mailing address, if applicable:		0 :::
Mailing address MAY BE A POST OFFICE BOX)	7 C C C C C C C C C C C C C C C C C C C	ယ္က 🖵
		-
		
B. If amending the registered agent and/or registered office address on o agent and/or the new registered office address here:	ur records, <u>enter the name o</u>	<u>f the new regis</u>
Name of New Registered Agent:		
		
New Registered Office Address: Enter	r Florida street address	
	. Florida	
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>	Name	<u>Address</u>	Type of Action
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			□Remove
			□ Change
			□Add
			□ Add Disconding to the property of the pr
			Change 3. Add
			□ Remove
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`an effective date Vote: If the dat	if other than the date is listed, the date must be e inserted in this block ctive date on the Depar	specific and cannot does not meet the	be prior to date of e applicable stat	f filing or more tha	(option 90 days after irements, this	o nal) filing.) Pur s date will	rsuant to 60. I not be list	5.0207 ted as
record specifie	s a delayed effective da	te, but not an effo	ective time, at 1	2:01 a.m. on the	carlier of: (b) The 90	th day afte	er the
			n					
d is filed.	July 1	. 2020						

Typed or printed name of signee