Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:	Division of Corporations Fax Number : (850)617-6383		ГБ: 4: <b>3</b> 0
From:	Account Name : GONZALEZ & ASSOCIATES Account Number : I20190000077 Phone : (954)773-7286 : Fax Number : (954)526-8825	III PA	į.
PM 12:	nter the email address for this business e annual report mailings. Enter only one of Email Address: AGONZALEZ AN	Suigit anniego bree-	
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	Division of Corporations				

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		CD MARKETING IIC			
UBJECT:		LER MARKETING, LLC			
JB020 (	Name of Limite	d Liability Company			
he enclosed Articles of A	Amendment and fee(s) are subm	itted for filing.		1	
	ndence concerning this matter to				
	antonio gonzalez				
		Name of Person		·	
	GONZALEZ & ASSOCIATES III PA				
		Firm/Company		120	
	1820 N CORPORATE LA	KES BLVD STE 107	·	9	
		Address		~p	
	WESTON, FL 33326	_	·	· <u></u>	
		City/State and Zip Code		ं . कु	
	agonzalez@amefin	ANCIALGROUP.COM			
	E-mail address: (t	o be used for future annual report notific	cation)		
For further information of	oncerning this matter, please ca	dl:			
ANTONIO GONZALE		954 773-7286		<del></del>	
Name o	of Person	Area Code Daytime	Telephone Number		
Enclosed is a check for t	he following amount:				
□ \$25.00 Filing Fee ■ \$30.00 Filing Fee & □ \$555.00 Filing Fee & □ \$60.00 Filing Fee & □ Certificate of Status  Certificate of Status (additional copy is enclosed)  Certificate of Status (additional copy is enclosed)					

Mailing Address:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## 

HE JEWELER M	MARKETING LLC	<u></u>	
Liability Compa Florida Limited	iny as it now appears on our recor- Liability Company)	d <u>s.</u> )	
bility Company	were filed on	and assigned	
the limited liab	oility company here:	'	
rds "Limited Liabi	ility Company," the designation "LL	C" or the abbreviation "L.L.C."	
ble:	N/A	DEC.	
(ADDRESS)			
<u>80X)</u>	N/A	99 H H 150	
s here:		er the name of the new register	
Name of New Registered Agent.			
1820 N COR			
WESTON	-	Florida <u>33326</u>	
	Cln:	Zip Code	
	Liability Company A Florida Limited bility Company wing: the limited liab rds "Limited Liab ble: r ADDRESS)  BOX) egistered office s here: GONZALEZ	the limited liability company here:  Index "Limited Liability Company," the designation "LL ble:  N/A  N/A  N/A  N/A  SOX)  Registered office address on our records, enters here:  GONZALEZ & ASSOCIATES III PA  1820 N CORPORATE LAKES BLVD STE 1  Enter Florida street address on our stree	

## 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.

f Changiag 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>	Address	Type of Action
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Dated	<u></u>	xemi	ber 9	202	<u>D</u> .				
			am	A X	,				
			Signature of	Amender of at	nhorized repres	entative of a me	mber		
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Filing Fee: \$25.00