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.

(((H24000318333 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : VENERABLE CORPORATE AND TRUST SERVICES, LLC

Account Number : I20210000107 Phone

: (813)284-4727

Fax Number

: (813)436-8460

\*\*Enter the email address for this business entity to be used for future

⊆ mail	Address:	notices@venerable.law
_		

# LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ALPHA MARKETING SOLUTIONS LLC

كالتكافية بنينا مورا بالبران والبرا والمتعاد والتساك والتبار والمتعادل والمتعاد والمتعاد والمتعاد والمتعاد والتبار والمتعاد	
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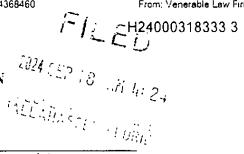
## H24000318333 3

## **COVER LETTER**

	Registration So Division of Cor			
aunus		ARKETING SOLUTIONS LL	С	
SUBJEC	.1:	Name of Lin	ated Liability Company	
The encle	osed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please re	turn all correspo	ondence concerning this matter	to the following.	
		JASON SAMPSON		
			Name of Person	<del></del>
		Venerable Corporate and I	Trust Services, LLC	
		· · · · · · · · · · · · · · · · · · ·	Firm Company	
		301 West Platt Street, No.	657	
			Address	··
		Tampa PL 33606		
		·	City/State and Zip Code	<del></del>
		jsampson@venerable.law	to be used for future annual report noti	Gration
For furth	er information <b>c</b>	oncerning this matter, please c		neattory
Jason Sai	mpson		813 284-4727	
	Name o	f Person	at ()	ne Telephone Number
Enclosed	is a check for th	ne following amount.		
<b>■</b> \$25,0	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	S60,00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Addres Registration S Division of C P.O. Box 632 Tallahassee, I	Section orporations 7	Street Address: Registration Se Division of Cor The Centre of T 2415 N. Monro Tallahassee, FL	porations fallahassee e Street, Suite 810

### From: Venerable Law Firm

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**



ALPHA MARKETING SOLUTIONS 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 L	iability Company	were filed on 07/09/2020	and assigned	
Florida document number L20000197131	·			
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name of	of the limited liab	oility company here:		
The new name must be distinguishable and contain the	words "Limited Liabi	hty Company," the designation "LLC" or the	abbreviation "L.L.C."	
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		8000 S. US hwy 1 Suite 201		
		Port Saint Lucie, FL. 34952		
Enter new mailing address, if applicable:		8000 S. US hwy 1 Suite 201		
Mailing address MAY BE A POST OFFICE BOX)		Port Saint Lucie, FL. 34952		
B. If amending the registered agent and/or agent and/or the new registered office addre	ss here:		ame of the new registered	
Name of New Registered Agent:	Venerable Corporate and Trust Services, LLC			
New Registered Office Address: 301 West Plat		t Street, No. 657		
		Enter Plorala street address		
	Tampa	, Florida	33606	
		Cny	Zip Code	

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.

> Lason Sampson If Changing Registered Agent, Signature of New Registered Agent

H24000318333 3
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

To:

<u>Title</u>	Name	Address	Type of Action
MGR	POST, JEREMY	107 SW Majestic Ter	□Add
		PORT SAINT LUCIE. FL 34984	Remove
			□Change
AR	POST, JEREMY	8000 S. US hwy 1 Suite 201	<b>=</b> Add
		Port Saint Lucie, FL. 34952	□Remove
			(Change
			□Add
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	<del></del>		
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			Remove
			□Change

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Effective date, if other than the date of filing:					<del></del>
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