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(Requestor's Name)
(Address)
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(Business Entity Name)
(Document Number)
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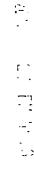
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COVER LETTER

	istration Sec sion of Corp			
	Marco Polo	Group, LLC		
SUBJECT:		Name of Lim	ited Liability Company	 -
The enclosed	Articles of a	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspo	ndence concerning this matter	to the following:	
		Nicholas F. Esposito		
			Name of Person	
		Esposito & Staubus LLP		
			Firm/Company	
		7055 Veterans Blvd. Unit	В	
			Address	
		Burr Ridge, IL 60527		
			City/State and Zip Code	
		E-mail address: (to be used for future annual report not	iffication)
For further in	iformation co	oncerning this matter, please c	all:	
Nicholas F. Esposito		312 346-2766		
Name of Person		at () Area Code Daytin	ne Telephone Number	
Enclosed is a	check for th	ne following amount:		
■ \$25.00 F	iling Fee	S30.00 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 Address: Registration Section		<u>Street Address:</u> Registration Sc	ection	
Division of Corporations		Division of Co	rporations	
P.O. Box 6327		The Centre of		
Tallahassee, FL 32314		∠4 L3 IN. MONIC	be Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	
Tompany as it now appears on our records.) mited Liability Company)	
npany were filed on August 3, 2020	and assigned
d liability company here:	
I Liability Company," the designation "LLC" or the	abbreviation "L.L.C."
	-
<u></u>	
	·
office address on our records, <u>enter the na</u>	me of the new regist
	r.
Enter Florida street address	
Enter Florida street address , Florid a	; ;
	d liability company here: I Liability Company," the designation "LLC" or the

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>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Vincent Solarino	1060 Borghese Lane Penthouse #3 Naples, FI 34114	
			□ Remove
		<u></u>	[] [Thange
			🗆 Add
			🗆 Remove
			□Change
			□Add
			□Remove
			□Change
			🗆 Add
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			□Change
			□Add
			□Remove
			□Change

	The state of the s
•	ading any other information
	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
_	
	
 -	
	
E. Effective dat	e, if other than the date of filing: May 1, 2021
Note: If the d document's ef	May 1, 2021 the 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 (3)(the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the decive date on the Department of State's records.
If the record specific record is filed.	es a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated May 3	2021
12	MILLE
رب	Signature of a member or authorized representative of a member
10	Ten DI PONATO
	Typed or printed name of signee