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COVER LETTER

то:	Registration Se Division of Cor		.	¥
SUBJEC	DM Creativ	e Marketing LLC		
SOBJE		Name of Lim	ited Liability Company	
The encl	osed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please re	eturn all correspo	ndence concerning this matter	to the following:	
		Creative Marketing LLC Name of Limited Liability Company les of Amendment and fee(s) are submitted for filing. respondence concerning this matter to the following: LEXIE RIVERS Name of Person PRIME CORPORATE SERVICES Firm/Company 12226 S 1000 E STE 3 Address DRAPER UT 84020 City/State and Zip Code lexie@primecorporateservices.com F-mail address: (to be used for future annual report notification) tion concerning this matter, please call: at (855) 577-4639 Area Code Daytime Telephone Number for the following amount:		
			Name of Person	
		PRIME CORPORATE SE	RVICES	
			Firm/Company	
		12226 S 1000 E STE 3		
			Address	
		DRAPER UT 84020		
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For furth	er information co		·	canon
	RIVERS		855 577-4639	
Name of Person			at () Area Code Daytime	Telephone Number
Enclosed	is a check for th	e following amount:		
□ \$25.	00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DM Creative Marketing LLC		
(<u>Name of the Limited Liability</u> (A Florida L	Company as it now appears on our records.) imited Liability Company)	
The Articles of Organization for this Limited Liability Cor Florida document number L20000273254	mpany were filed on	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	ed liability company here:	
DM Creative Solutions LLC		
The new name must be distinguishable and contain the words "Limited	d Liability Company," the designation "LLC" o	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRE	SS)	2020 SEG
		20. 10. 10. 10. 10. 10. 10. 10. 10. 10. 10.
		7 2
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
Manual State De A TOST OF THE BOXY		
		<u> </u>
B. If amending the registered agent and/or registered agent and/or the new registered office address		enter the name of the nev
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	·
	Flori	da
	City	Zm 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 = Ma AMBR = Au	nager thorized Member		
<u>Title</u>	Name	Address	Type of Action
			Add
			Remove
			Change
			□ Add
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record specifies a delayon he 90th day after the re	ed effective date, cord is filed.	but not a	n effective	time, at 12:0	01 a.m. on the	e earlier
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Filing Fee: \$25.00