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| (R | equestor's Name) | |
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| (A | ddress) | |
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| PICK-UP | ☐ WAIT | MAIL |
| (Bu | usiness Entity Nan | ne) |
| (Do | ocument Number) | - |
| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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A. BUTLER JAN 18 2022

COVER LETTER

TO: Registration Section

| Division of Cor | porations | | | | | | | |
|------------------------------|--|--|---|--|--|--|--|--|
| Net D | irect Marketing | LLC | | | | | | |
| SUBJECT: | Name of Lim | ited Liability Company | | | | | | |
| | | | | | | | | |
| The enclosed Articles of | Amendment and fee(s) are sub | mitted for filing. | | | | | | |
| Please return all correspo | ondence concerning this matter | to the following: | | | | | | |
| | Jasmine Jam | 20 | | | | | | |
| | Jasiiiile Jaiii | Name of Person | , | | | | | |
| | Wyoming Co | orporate Services | | | | | | |
| | | Firm/Company | | | | | | |
| | 1712 Pioneer | Ave | | | | | | |
| | | Address | | | | | | |
| | Cheyenne, \ | NY 82001 | | | | | | |
| | | City/State and Zip Code | | | | | | |
| | | | | | | | | |
| | | to be used for future annual report notification) | | | | | | |
| For further information of | oncerning this matter, please c | 111: | | | | | | |
| Jasmine Jan | nes | at (307 Area Code) 632-3333 Daytime Telephone N | | | | | | |
| Name o | f Person | Area Code Daytime Telephone Y | Number | | | | | |
| | | | | | | | | |
| Enclosed is a check for the | he following amount: | | | | | | | |
| ₹ \$25.00 Filing Fee | □ \$30.00 Filing Fee & Certificate of Status | Certified Copy Co (additional copy is enclosed) Co | 0.00 Filing Fee, ertificate of Status & ertified Copy dditional copy is enclosed) | | | | | |
| Mailing Addres | | Street Address: | | | | | | |
| Registration : Division of C | | Registration Section Division of Corporations | | | | | | |
| P.O. Box 632 | | The Centre of Tallahassee | | | | | | |
| Tallahassee, | FL 32314 | 2415 N. Monroe Street, S Tallahassee, FL 32303 | uite 810 | | | | | |

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| Net Direct Marketing LLC | 9159 1881 6 | | | | | |
|---|--|----------------|--|--|--|--|
| (Name of the Limited Liability Comp: (A Florida Limited | any as it now appears on our records:) | | | | | |
| The Articles of Organization for this Limited Liability Company Florida document number L20000291227 | . f. | j | | | | |
| This amendment is submitted to amend the following: | | | | | | |
| A. If amending name, enter the new name of the limited liab | bility company here: | | | | | |
| The new name must be distinguishable and contain the words "Limited Liabi | ility Company," the designation "LLC" or the abbreviation "L.L.C." | | | | | |
| Enter new principal offices address, if applicable: | 1422 Leo Ln. East | | | | | |
| (Principal office address MUST BE A STREET ADDRESS) | Clearwater, FL, 33755 | | | | | |
| | | | | | | |
| Enter new mailing address, if applicable: | 1422 Leo Ln. East | | | | | |
| (Mailing address MAY BE A POST OFFICE BOX) | Clearwater, FL, 33755 | | | | | |
| | | | | | | |
| B. If amending the registered agent and/or registered office agent and/or the new registered office address here: | address on our records, enter the name of the new reg | <u>isterec</u> | | | | |
| Name of New Registered Agent: | | | | | | |
| New Registered Office Address: | | | | | | |
| | Enter 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 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> | Address | Type of Action |
|--------------|---------------------|-------------------------|--------------------|
| MGR | ABC Consulting, LLC | 1712 Pioneer Ave Ste 70 | 00 _{□Add} |
| | | Cheyenne, WY 82001 | Remove |
| | | | □Change |
| MGR | Shnyiah Pitts | 1422 Leo Ln. East | (X Add |
| | | Clearwater, FL, 33755 | □Remove |
| | | | □Change |
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| ective | date, i | fother | than the | e date o | f filing | | w prior ! | o duta of | filing or n | ore than | (0) | ptional) |) Pursuant | to 605.020 |
| te: If | the date | inserted | in this b | łock doc | s not m | icet the | applica | ble stati | ntory filin | g requir | ements, | this date | will not l | be listed a |
| umen | it's effec | tive date | on the I | Departmo | ent of S | tate's re | ecords. | | | | | | | |
| cord (| snecifies | a delavo | d effecti | ve date. | but not | an effe | ctive tir | ne, at 12 | :01 a.m. | on the e | arlier of | : (b) Tì | ne 90th da | y after the |
| s filed | | u deluj i | | | | | | ٠ | | | | · | | |
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| led <u>4</u> | in da | y OI J | anuar | у | , | | - | J. J. | | | | | | |
| | | | | | | | 21 | | | | | | | |
| | | | | Signate | re of a r | nember | or autho | rized rep | resentativ | of a me | nber | | | |

500 E 6350