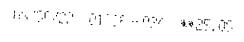
L20000317835

	(Requestor's Name)
	(Address)
	(1.000)
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	(City/State/Zip/Phone #)
	,
PICK-UP	WAIT MAIL
	(Business Entity Name)
	(December Month and
	(Document Number)
Certified Copies	Certificates of Status
Special Instructions t	o Filing Officer:
	

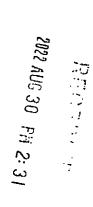
Office Use Only



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2022 AUG 30 AM 10: 09



CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

AMERICA'S MEDICA	L MARKET	ΓING		
GROUP LLC				
GROOT EEC				
				Art of Inc. File
				LTD Partnership File
				Foreign Corp. File
				L.C. File
				Fictitious Name File
				Trade/Service Mark
				Merger File
				Art, of Amend, File
				RA Resignation
				Dissolution / Withdrawal
				Annual Report / Reinstatement
				Cert. Copy
				Photo Copy
			1	Certificate of Good Standing
				Certificate of Status
				Certificate of Fictitious Name
				Corp Record Search
				Officer Search
				Fictitious Search
<u> </u>				Fictitious Owner Search
Signature				Vehicle Search
				Driving Record
Requested by: SETH				UCC 1 or 3 File
				UCC 11 Search
Name	Date	Time		UCC 11 Retrieval
Walk-In	Will Pick Up		l	Courier

COVER LETTER

	Registration Sec Division of Corp			
01771E		MEDICAL MARKETING	GROUP LLC	
SUBJEC	1:	Name of Lim	ited Liability Company	-
		mendment and fee(s) are sub		
		RICHARD CROWDER		_
			Name of Person	_
		AMERICA'S MEDICAL	MARKETING GROUP LLC	
			Firm/Company	
		10 FAIRWAY DRIVE SU	ITE 142 V	
			Address	
		DEERFIEDL BEACH, FL	ORIDA 33441	
			City/State and Zip Code	
		RICKCROWDER@YAHO		
		E-mail address: (to be used for future annual report notifica	ition)
For further	r information co	ncerning this matter, please co	ail:	
RICHAR	D CROWDER		954 245-1744 at ()	
	Name of	Person		elephone Number
Enclosed	is a check for th	e following amount:		
□ \$ 25.0	0 Filing 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
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**

FILED 2022 AUG 30 AM 10: 10

AMERICA'S MEDICAL MARKETING GROUP 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 Florida document number L20000317835	iability Company	were filed on 10/07/2	2020	and assigned
This amendment is submitted to amend the foll	owing:			
A. If amending name, enter the new name o	f the limited liab	ility company here:		
The new name must be distinguishable and contain the v	vords "Limited Linbi	lity Company," the design	ation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applic	able:	130 NE 25TH CT		
(Principal office address MUST BE A STREE		POMPANO BEACH, FL. 33064		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE) B. If amending the registered agent and registered agent and/or the new registered of	or registered o			the name of the new
Name of New Registered Agent: New Registered Office Address:	IVAN FERGU:			
New Registered Office Address.	Enter Florida street address			
	POMPANO BE	EACH	, Florida 330	064
		Clty	_	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, Lhereby 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

Title	<u>Name</u>	Address	Type of Action
MGR	RICHARD CROWDER	10 FAIRWAY DRIVE ST 100F	
		DEERFIELD BEACH, FL. 33441	■ Remove
			☐ Change
			□ Add
			Remove
			Change
			DAdd
			Remove
			Change
			Add
			□ Remove
			Change
			Remove
			Change
			DAdd
			□ Remove
			☐ Change

ective date, if other than the date of filling: (optional) reflective date 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. tes: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be liste rument's effective date on the Department of State's records. record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlies the 90th day after the record is filed.	THE ARTICLES NEVER POSTED AS A PDF ON SUNBIZ	
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ective date, if other than the date of filing: effective date 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. E: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be liste ument's effective date on the Department of State's records. The effective date on the Department of State is records. The effective date on the Department of State is records. The effective date 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. Example 1 days after the filing is a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of the effective day after the record is filed.		
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od 08-29 , 2022 .		e, at 12:01 a.m. on the earlie
	od ⁰⁸⁻²⁹	
X F		
Signature of a member or authorized representative of a member	Signature of a member or authorized representative of a	a member
	IVAN FERGUSON	

Page 3 of 3

Filing Fee: \$25.00