LZ10000049013

(Requestor's Name)	
(Address)	
, ,	
(Address)	
(City/State/Zip/Phone #)	·=-
PICK-UP WAIT	MAIL
(During Laboratory)	
(Business Entity Name)	
(Document Number)	· - · · ·
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COVER LETTER

Registration Section

TO:

Divis	ion of Cor	porations		
	SEC MARE	KETING LLC		
SUBJECT: _		Name of Lim	ited Liability Company	
The enclosed .	Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return a	ill correspo	ndence concerning this matter	to the following:	
		Joseph V. Priore		
		·	Name of Person	-
		SANTUCCI PRIORE, P.1	. .	
			Firm/Company	
		200 South Andrews Avenu	ue, Suite 100	
			Address	
		Fort Lauderdale, FL 3330	1	
			City/State and Zip Code	
		jpriore@500law.com	to be used for future annual re	eport notification)
For further inf	ormation co	oncerning this matter, please c		
Joseph V. Pric	ore		954	351-7474
	Name of	f Person	at () Area Code	Daytime Telephone Number
Enclosed is a c	check for th	ne following amount:		
≘ \$ 25.00 Fil	ling Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status &
Regi	ing Addressistration S	Section	_	tion Section
P.O.	Box 632		The Cen	of Corporations tre of Tallahassee
Talla	ahassee, I	² L 32314	2415 N.	Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



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SEC MARKETING	G LLC	
(<u>Name of the Limited Liability C</u> (A Florida Lir	ompany as it now appears on our record mited Liability Company)	<u>s.</u>)
The Articles of Organization for this Limited Liability Com Florida document number <u>L21000049013</u>	pany were filed on 01/27/2021	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	l liability company here:	
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC	" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES	<u></u>	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	ffice address on our records, <u>enter</u>	the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addres.	S
	Flo	orida
	City	Zip Code

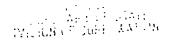
New Registered Agent's Signature, if changing Registered Agent:

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 Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member



<u>Title</u>	<u>Name</u>	Address 21 APR 19 PM 1: 31	Type of Action
MGR	Dawn Hakanson McCormick	4864 S. CLASSICAL BLVD.	🗆 Add
		DELRAY BEACH, FL 33445	□Remove
			Change
			□Add
			□Remove
			□Change
			🗆 Add
			□Remove
		 	□Change
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			□Remove
			□Change
			Add
			□Remove
		 -	□Change
			□Add
			□Remove
			□ Change

If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary	图法基础
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		<u>-</u>
-		
Note:	ive date, if other than the date of filing:	.) Pursuant to 605.0207 will not be listed as
ne recor	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) Theled.	e 90th day after the
Dated	April 13 2021	
	/ XV	
	Charles and the state of the st	
	Signature of a member or authorized representative of a member	

Filing Fee: \$25.00