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COVER LETTER

TO:	Registration Se Division of Cor			
0115.15	_ :-	arketing, LLC		
SUBJE	CT:	Name of Lim	nited Liability Company	
The end	losed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please r	eturn all correspo	ondence concerning this matter	to the following:	
		Victor Alba		
			Name of Person	
		T&V Unlimited, Inc.		<u> </u>
			Firm/Company	•
		7726 Winegard Road		
			Address	7-
		Orlando, Florida 32809		
			City/State and Zip Code	
		victor@positivemarketing.c		
Ea- 6	, L:- <i>f</i>		to be used for future annual report no	tification)
		concerning this matter, please of		
Sasha A	A. Francis, Esq.		954 715-1933 at ()	
	Name o	f Person	Area Code Daytii	ne Telephone Number
Enclose	ed is a check for the	he following amount:		
≡ \$25	i.00 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 1 Division of C P.O. Box 632 Tallahassee, 1	Section Corporations 27	Street Address: Registration So Division of Co The Centre of	rporations

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Positive Marketing, LLC		
(Name of the Limited Liability Compa (A Florida Limited)	iny as it now appears on our records. Liability Company))
The Articles of Organization for this Limited Liability Company Florida document number L21000108877	were filed on 03/08/2021	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC"	G.7
Enter new principal offices address, if applicable:		JET Tet
Principal office address MUST BE A STREET ADDRESS)		<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 office agent and/or the new registered office address here:	address on our records, <u>enter t</u>	<u>he паше of the new registe</u>
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Flor	rida
New Registered Agent's Signature, if changing Registered Agent;	City	Zip Code
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	e performance of my duties, and provided for in Chapter 605, F	d I am familiar with and C.S. Or, if this document is

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>	Address	Type of Action
AMBR ;	T&V Unlimited, Inc.	7726 Winegard Rd., Orlando, Florida 32809	🖺 Add
			□Remove
			□ Change
		***************************************	□Add
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ective date, if other than the date of filing:	(optional)
ective date, if other than the date of filing: n effective date is listed, the date must be specific and cannot be prior to date of filing te: If the date inserted in this block does not meet the applicable statutory	or more than 90 days after filing.) Pursuant to 60 filing requirements, this date will not be lis
cument's effective date on the Department of State's records.	v .
	.) I'E (L) Th- 00th day of
ecord specifies a delayed effective date, but not an effective time, at 12:01 a is filed.	a.m. on the eartier of: (0) The 90th day are
2024	
ted MARCH 27th, 2024	
signature of a member or authorized represen	

Filing Fee: \$25.00