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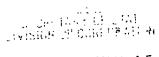
## **COVER LETTER**

n Bitions	
Marketing Time LLC Name of Limited Liability Company	
endment and fee(s) are submitted for filing.	
nce concerning this matter to the following:	
Con Sotion Outos  Name of Person	
Marketing Time LLC	
PO BOX 810513	
Boca Raton FL 33481  City/State and Zip Code  JODIE. A. S. Chotmail. Com	
son at (310) 185 3050  Area Code Daytime Telephone Number	_
Howing amount:	
S30.00 Filing Fee & S60.00 Filing Fee & S60.00 Filing Fee & Certificate of Status  Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is	Status &
	Name of Limited Liability Company  Endment and fee(s) are submitted for filing.  Ince concerning this matter to the following:  Con Sotty Quales  Name of Person  Marketing Time LC  Firm/Company  PO Box 8 10513  Address  Boca Rater FL 334181  City/State and Zip Code  JODIE A See Not mail . Com  E-mail address: (to be used for future annual report notification)  ruing this matter, please call:  O Company  Area Code Daytime Telephone Number  Illowing amount:  Ill \$30.00 Filing Fee & S55.00 Filing Fee & Gertificate of Status  Certified Copy  (additional copy is enclosed)  Certified Copy  (certified Copy  (certified Copy  (certified Copy)  (certified Copy  (certified Copy)  (certified Copy)  (certified Copy  (certified Copy)  (certified Copy)  (certified Copy)

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



21 APR-5 船川: 45

Marketin	n Time	LLC	
( <u>Name of the Limited Liability</u> (A Florida	Company as it now appea Limited Liability Company)	irs on our records.)	<del></del>
The Articles of Organization for this Limited Liability Co		13-18-20	2_\and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limit	ted liability company h	ere:	
The new name must be distinguishable and contain the words "Limit	ted Liability Company," the	designation "LLC" or the abb	oreviation "L.L.C."
Enter new principal offices address, if applicable:			<u>.                                    </u>
(Principal office address MUST BE A STREET ADDRE	<u>ESS)</u>		-
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)		<del></del>	
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our i	records, <u>enter the name</u>	of the new registered
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Flo	rida street address	
	City	Florida	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: LET (ARE LE STATE LEVISION DE COPT DE ALLEM

MGR = Manager

AMBR = Authorized Member

21 APR -5 AMIL: 65

		ZI ACK TO BUTTERY	
<u>Title</u>	<u>Name</u>		Type of Action
MGR	JODIE STILLEDIOS	3580 gibbs Rd, Delay Buch	FC 33435 <u>-</u> XXAdd
			□Remove
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MCR	Joac	Sotiropallos Sotiropoulos	<u>50</u> %	ownership
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