## Florida Department of State

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 : (307)200-2803 Phone : (855)330-1010 Fax Number

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:\_\_\_

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN DMARKETING USA LLC

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

## DMARKETING USA LLC

ì

(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 Liability Company	were filed on 05/24/21	and assigned
Florida document number L21000240641		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the	
Enter new principal offices address, if applicable:	7901 4th St N STE 300	2022 SEC
(Principal office address MUST BE A STREET ADDRESS)	St. Petersburg, FL 33702	
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Enter new mailing address, if applicable:		<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		20
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, enter the na	nme of the new registered
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>	Name	Address	Type of Action
MGR	JIMENEZ, CATALINA	1333 WELSON RD	□Add
		ORLANDO, FL 32837	<b>∑</b> Remove
			🗀 Change
MGR	Pineda, Diego	Kilometro 17 autopista norte	<b>X</b> Add
		chia colombia	□Remove
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Filing Fee: \$25.00