5/25/23, 9:40 AM

Division of Corporations

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To:

Division of Corporations

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: (850)617-6383

From:

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Account Number : I20010000062

Phone : (323)962-8600 Fax Number : (323)389-0502

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

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S. ROBERTS

MAY 2 6 2023

COVER LETTER

	Registration S Division of Co					
SUBJEC	TAILORE	ED MESSAGES LLC				
· SUBJEC.		Name of Lis	nited Liability Company	· · · · · · · · · · · · · · · · · · ·		
		f Amendment and fee(s) are su				
Please ret	um all corresp	ondence concerning this matte	to the following:			
		Cheyenne Moseley				
	Name of Person					
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		Glendale, CA 91203				
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		mohanzalakel 23@gmail.com				
For further	r information c	E-mail address: (Oncerning this matter, please c	to be used for future annual report not	ilicanon)		
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	Registra	NG ADDRESS: ation Section n of Corporations ox 6327	STREET/COURI Registration Section Division of Corpor Clifton Building	on .		

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

To:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TAILORED MESSAGES I.LC		<u> </u>
(Name of the Limited Liability Compa (A Florida Limited I	Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L21000396151	were filed on <u>09/07/2021</u>	and assigned
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liab	ility company here:	
he new name must be distinguishable and contain the words "Limited Liabil		<u>ب</u>
nter new principal offices address, if applicable:	255 S. Orange Ave., Suite 104 PMB 1303	·
Principal office address MUST BE A STREET ADDRESS)	Orlando, Florida 32801	
		, .
		;
nter new mailing address, if applicable:		رد: در:
Mailing address MAY BE A POST OFFICE BOX)		
Talling annual MAT BENT OUT OF TICE BOX		
. If amending the registered agent and/or registered of egistered agent and/or the new registered office address here	fice address on our records, <u>enter th</u> e:	ne name of the
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 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
AMBR	Mohan Zalake	25 W Randolph St., Apt #2420 Chicago, Illinois 60601	≅ Add
			□ Remove
		·	D. 61
			□ Remove
			Change
			Add
			☐ Remove
			Change
•			□ Add
			□ Remove
			Change
			□ Add
			□ Remove
			Change
			Add
			Remove
			O Change

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated 5 / 12 / 2 2 3

Signature of a member or authorized representative of a member

Mohan Zalake

Typed or printed name of signee

Page 3 of 3

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