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COVER LETTER

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Tallahassee, FL 32314

TO:

	Registration Se Division of Cor					
SUBJEC	Verdansk N	farketing LLC				
SUBJEC	1:	Name of Limited Liability Company				
The enclo	sed Articles of	Amendment and fee(s) are sub-	mitted for filing.			
Please ret	urn all correspo	ndence concerning this matter	to the following:			
		Jacqueline Quiroga				
			Name of Person			
		ZenBusiness INC				
			Firm/Company			
		5511 Parkerest Drive STE	103			
			Address			
		Austin, Texas, 78731				
		 	City/State and Zip Code			
		fulfillment@zenbusiness.co	on to be used for future annual report not	(Continu)		
For furthe	er information c	oncerning this matter, please ca		incarra)		
Jacquelin	ne Quiroga c/o Z	ZenBusiness INC	844 493-6249			
	Name o	f Person	at () Area Code Daytin	ne Telephone Number		
Enclosed	is a check for th	ne following amount:				
■ \$25.0	00 Filing Fee	☐ \$30.00 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 Addres		Street Address:	otion		
Registration Section Division of Corporations P.O. Box 6327		Registration Se Division of Co				
			The Centre of			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

1921 ST. 30 PH 5: 44

		EU 2: 44
Verdansk Marketing LLC	C) "
(A Florida L	Company as it now appears on our records imited Liability Company)	<u>-</u>)
The Articles of Organization for this Limited Liability Cor	mpany were filed on	and assigned
lorida document number 1.21000402352		
This amendment is submitted to amend the following:		
a. If amending name, enter the new name of the limite	ed liability company here:	
Verdansk Master Markets LLC		
he new name must be distinguishable and contain the words "Limite	d 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 ADDRE	<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 ϵ	office address on our records, <u>enter (</u>	the name of the new registe
gent and/or the new registered office address here:		
Name of New Registered Agent:		·
New Registered Office Address:		
	Enter Florida street address	
	Flo	rida
	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

<u>Title</u>	<u>Name</u>	Address 2011 SE 130 PH 5: 44	Type of Action
			□Add
			□Remove
			□Change
			🗆 Add
			□Remove
			□Change
			□Add
			□Remove
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			Remove
			Change

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Signature of a member or authorized representative of a member	Dated September 27th	2021
Daniel Mulroy	S	ignature of a member or authorized representative of a member
	Daniel Mulroy	

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Filing Fee: \$25.00