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## RECEIVED

2022 FEB 28 PM 1:41

SECRETARY OF STATE TALLAHASSEE, FL

FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 4, 2022

SAMANTHA GAYLORD 4376 BRANDYWINE DR SARASOTA, FL 34241

SUBJECT: APREXYZ MARKETING LLC

Ref. Number: L21000476783

We have received your document for APREXYZ MARKETING LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

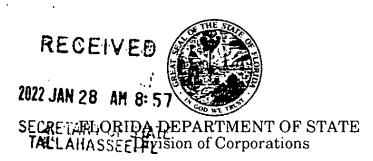
Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Octavia L Simmons
Regulatory Specialist II Supervisor

Letter Number: 122A00002800

www.sunbiz.org



January 8, 2022

SAMANTHA GAYLORD 4376 BRANDYWINE DR SARASOTA, FL 34241

SUBJECT: APREXYZ MARKETING LLC

Ref. Number: L21000476783

We have received your document for APREXYZ MARKETING LLC, however, upon receipt of your document no check was enclosed. Please return your document along with a check or money order made payable to the Department of State for \$30.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 622A00000597

Octavia L Simmons
Regulatory Specialist II Supervisor

www.sunbiz.org

Division of Communities D.O. BOY 0007 William Et al. 20014

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Aprexyz Marketing LLC  Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Samantha Gaylord
APREXYZ MAYKETING LLC Firm/Company
4376 Branchwine Drive
Savas Dta, FL 34241  City/State and Zip Code  Chay love Cavoline and Lip Code  (Figure 1) (1) (1) (2) (2) (2) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4
For further information concerning this matter, please call:
Samantha Gaylord at 941, 330 - 646 Daytime Telephone Number
Enclosed is a check for the following amount:
☐ \$25.00 Filing Fee

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

FILED

APREXYZ	MARKETING LEDGEB 28 AM 7:00
(Name of the Limited)	d Liability Company as it now appears on our records.)
	・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・
The Articles of Organization for this Limited Lia	
Florida document number <u>L210004</u>	16783
This amendment is submitted to amend the follow	wing:
A. If amending name, enter the new name of	the limited liability company here:
The new name must be distinguishable and contain the wo	ords "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applica	ble:
(Principal office address MUST BE A STREET	ADDRESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE B	(OX)
B. If amending the registered agent and/or req agent and/or the new registered office address	gistered office address on our records, <u>enter the name of the new registered</u> here:
Name of New Registered Agent:	Samantha Gaylord 4374 Brandwine Drive
New Registered Office Address:	H374 Brandwine Drive  Enter Florida street address
	Sara50+9, Florida 34241
New Registered Agent's Signature, if changing Re	egistered 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>	Name	Address	Type of Action
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record speci is filed.	cifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (	b) The 90th day after the
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_	Signature of a member of authorized representative of a member	• • • • • • • • • • • • • • • • • • • •

Filing Fee: \$25.00