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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 : (561)694-8107 Phone : (561)214-8442 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:	
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MARKETING HUB LLC

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZAȚION OF

MARKETING HUB LLC (Name of the Limited Liability Compa (A Florida Limited I	nry as it now appears on our records.)	
The Articles of Organization for this Limited Liability Company Florida document number L21000516951		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the	abbreviation "L.L.C."
	2598 E. SUNRISE BLVD STE 2104	202
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	FORT LAUDERDALE, FL 33304	7
[] The span vyfice diagress. Tools as a second second		R 2
Enter new mailing address, if applicable:	2598 E. SUNRISE BLVD STE 2104	
(Mailing address MAY BE A POST OFFICE BOX)	FORT LAUDERDALE, FL 33304	<u> </u>
B. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent:	address on our records, enter the na	me of the new registered
New Registered Office Address:		
New Registered Office Address.	Enter Florida street address	
	, Florida _	Zip Code
New Registered Agent's Signature, if changing Registered Agent:	•	and control
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as	e performance of my duties, and I an	i familiar with and

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:

→ 18506176383

MGR = Manager AMBR = Authorized Member

Title	<u>Name</u>	Address	Type of Action
AMBR	LIPKIN, SHIMON	2598 E. SUNRISE BLVD STE 2104	□Add
		FORT LAUDERDALE, FL 33304	□Remove
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Effective date, if other than	must be specific and cann	ot be prior to date o	of filing or more than s	(optional) O days after filing.) Pursual	nt to 605.0207 (
Note: If the date inserted in the document's effective date on the	is block does not meet the Department of State's	ne applicable sta s records.	unory ming require	ments, this date will not	i or used as t
		ffective time, at	12:01 a.m. on the ea	arlier of: (b) The 90th c	lay after the
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he record specifies a delayed efford is filed.  Dated March 21		er or authorized re	presentative of a mer	nher	