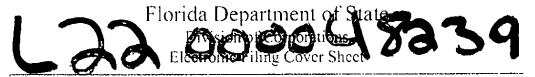
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Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Doing so will generate another cover sheet.	ΑĊ

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : YOUR DREAM SERVICES CORP.

Account Number : I20200000137 Phone : (786)660-0108 Fax Number : (786)364-1047

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

Email Address:

INFO@YOURDREAMMS.COM

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN LUZARDO MARKETING LLC

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C. BRUMBLEY

SEP 27 2022

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(((H22000329449 3)))

Tallahassee, Fl. 32314

## **COVER LETTER**

(((H22000329449 3)))

TO: Registration S Division of Co			
STID IPZTE.		RDO MARKETING LLC	
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	GABRII	ELA LUZARDO ANGULO	
		Name of Person	<del>.</del>
		Jabrisla luzardo	
		Firm Company	
	645	NW IRST ST APT.809	
		Address	
		MIAMI, FL 33128	
		City/State and Zip Code	<del></del>
	gabyfuzardo 20@gmail E-mail address: (	to be used for future annual report not	iticstion)
For further information	concerning this matter, please c	· ·	
GABRIELA LUZARD	00	70.	
Name	of Person	at ( <u>785</u> ) <u>7747-8</u> Area Code Daytin	a Felephone Number
Enclosed is a check for	the following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	<ul> <li>\$60.00 Filing Fee.</li> <li>Certificate of Status &amp;</li> <li>Certified Copy (additional copy is enclosed)</li> </ul>
MailingAddr		StreetAddress:	
Registration Division of	Section Corporations	Registration Se Division of Co	
P.O. Box 63		The Centre of	

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

(((H22000329449 3)))

17863641047

	UZARDO MARKE			
(Name of the Lim	ted Liability Compa (A Florida Limited)	my as it <del>now appears on our</del> Liability Company)	records.)	
The Articles of Organization for this Limited I	iability Company	were filed on 01/27/2022	2	_ and assigned
Florida document number L22000048239	·			
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name of	of the limited liab	ility company here:		
MAROUSSI SWIMWEAR LLC				
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation	on "LLC" or the abbra	eviation "L.L.C."
Enter new principal offices address, if applicable:		3411 WEST 110TH ST		
(Principal office address MUST BE A STREET ADDRESS)		HIALEAH GARDENS	, 33018	
	<del></del>			2022
Enter new mailing address, if applicable:		3411 WEST 110TH ST		SEP 2
(Mailing address MAY BE A POST OFFICE BOX)		HIALEAH GARDENS	, 33018 S	Ann
			امارات مرازات مرازات	₹ III
B. If amending the registered agent and/or agent and/or the new registered office addre		address on our records,	enter the name	of the new registers
Name of New Registered Agent:	YOUR DREAD	M MULTISERVICES CO	RP	
New Registered Office Address:	8300 NW 53 RD ST SUITE 350			
		Enter Florida stree	t address	
	MIAMI		Florida <u></u>	6
		City	-	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

Page: 4 of 6

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. Thereby confirm that the limited liability company has been notified in writing of this change.

Asaman Tornes
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:

((1122000329449.3)))

MGR = Manager AMBR = Authorized Member

Title	<u>Name</u>	Address	Type of Action
MGR	MARCEL ABRAHAM CASTELLANOS	3411 west 110th st	■Add
		Hialeah gardens, fl 33018	□ Remove
			□Change
AMBR	GABRIELA LUZARDO ANGULO	3411 west £10th st	<b>=</b> Add
		Hialeah gardens, fl 33018	□Remove
			Change
AMBR	FLOR MISITA MATOS	3411 west 110th st	■Add
		Hialeah gardens, fl 33018	🗀 Reлюче
			☐Change
			□Add
			□Remove
			□Change
			□Remove
			□Change
			🗀 Add
			Remove
			□Change

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ffective date, if other than the an effective date is listed, the date in this bocument's effective date on the l	lock does not meet the applicabl	late of filing or more than 90 de e statutory filing requireme	_ (optional) ys after filing.) Pursuant to 605,0205 nts, this date will not be listed as
record specifies a delayed effecti is filed	re date, but not an effective time	, at 12:01 a.m. on the earlie	er of (b). The 90th day after the
00022	2022		
ated			
ated	Marcel Abrah	am Castellanos	

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