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## **COVER LETTER**

TO:

Registration Section
Division of Corporations

Division of Corporations

Tallahassee, Fl. 32314

P.O. Box 6327

SUBJECT: ONE LIKE MARGETING AGENCY LLC Same 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:	
Jolybett Mendes	
One Like Harketing Agency Uc	
29942 Gallatin River Ln	
Katy TEXAS 77494	
Joly bett men des a hotmail um	
For further information concerning this matter, please call:	
John bett Plendes at 1954, 9823644  () Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
	ı
Mailing Address:  Registration Section  Street Address:  Registration Section	

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO

## ARTICUES OF ORGANIZATION

ARTELLES	)F	2024 JUN 24	AH 8:38
ONE LIKE MARKETING (Name of the Limited Liability Comp	AC AC	SENCAL TECOLORY	STATE TEH
The Articles of Organization for this Limited Liability Company			
Florida document number <u>724A00008085</u> .	,		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	bility company	here:	
ONE LIKE TIARETING The new name must be distinguishable and contain the words "Limited Liable			reviation "L. L. C"
Enter new principal offices address, if applicable:			
Principal office address MUST BE A STREET ADDRESS)	~		
nter new mailing address, if applicable: <u>failing address MAY BE A POST OFFICE BOX</u> )  . If amending the registered agent and/or registered office agent and/or the new registered office address here:		2 Gallatin TX 774	
Name of New Registered Agent:	<del></del>	W.L.	
New Registered Office Address:	Enter Florida street address		
		Florida	
vi <del>nakadininininini</del>	Car		Lyr Cente
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent and agrowsisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	- ree to act in thi performance provided for it	of my duties, and I am fa v Chapter 605, F.S. Or, ij	miliar with and this document is
If Cha	ngina Registered	August Shapataga of Nau, B., Shapataga	

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	Name	Address	Type of Action
	Gabriela Romero	20730 Groveline Ct	
		Estero, Pl 33928	ERemove
			DChange
			DAdd
			□Remove
			🗆 Change
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			□Remove
			DChange

D. If amei	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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NOTE: II	date, if other than the date of filing:
If the record s record is filed	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b). The 90th day after the
Dated	June 13th . 2024.
	Signature of a member or authorized representative of a member
	Joby bett Mencles Typed or printed name of signer

Filing Fee: \$25.00