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S. CHATHAM OCT - 9 2022

SECRETARY OF STATE COMPORATIONS

COVER LETTER

	Registration Se Division of Cor			
SIID IE	Markev LL			
SUBJEC	;T:		ited Liability Company	
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	turn all correspo	ondence concerning this matter	to the following:	
		Margerth Sevilla		
			Name of Person	
		Markev LLC		
			Firm/Company	
		6130 W. 21st Ct., Apt 106		
			Address	
		Hialcah, FL 33016		
			City/State and Zip Code	
		margerths@gmail.com		
		E-mail address: (to be used for future annual report noti	fication)
For furth	er information co	oncerning this matter, please ca	all:	
Margertl	h Sevilla		786 222-4020	
	Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed	is a check for th	ne following amount:		
□ \$25.	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 Address: Registration Section Division of Corporations P.O. Box 6327 Tallaharcaa El 32314

Street Address: Registration Section **Division of Corporations** The Centre of Tallahassee 2415 N. Monroe Street, Suita 910

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Markey LLC		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) iability Company)	
he Articles of Organization for this Limited Liability Company	were filed on <u>5/11/2022</u>	and assigned
lorida document number L22000222624		
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liab	ility company here:	
he new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or	r the abbreviation "L.L.C."
nter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		
		Sign
nter new mailing address, if applicable:		- 3 6
<u> Aailing address MAY BE A POST OFFICE BOX)</u>		- <u>10</u>
		70
 If amending the registered agent and/or registered office agent and/or the new registered office address here: 	address on our records, <u>enter the</u>	e name of the new regis
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Floric	
	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 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	Type of Action
AMBR	Margenth Sevilla	6130 W. 21st Ct, Apt 106, Hialeah, FL 33016	
			□Remove
			□Change
			□Add
			□Remove
			Olvisse Ochiange
			Remove
			□Change
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fective date, if other than the	6/20/2022	4	optional)
in effective date is listed, the date mu	ist be specific and cannot be prior to	date of filing or more than 90 days	after filing.) Pursuant to 605,020
ote: If the date inserted in this becament's effective date on the D	lock does not meet the applicable partment of State's records.	le statutory filing requirements	this date will not be listed a
ecord specifies a delayed effective is filed.	ve date, but not an effective time	e, at 12:01 a.m. on the earlier o	f: (b) The 90th day after the
June 20th	2022		
Margerth Se	vuu		
Margerth Se	Signature of a member or authoriz	zed representative of a member	

Filing Fee: \$25.00