## Florida Department of State Division of Gorporations

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081

Phone : (307)200-2803

Fax Number : (855)330-1010

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

Email Address:

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

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C. BRUMBLEY

UEC - 7 2022

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Trinity Marketing LLC		
(Name of the Limited Liability Compar (A Florida Limited L	iv as it now appears on our records.)	
The Articles of Organization for this Limited Liability Company vi Florida document number L22000499480		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	lity company here:	
Trinity Marketing International LLC		
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "LLC" or the a	abbreviation "L.L.C."
Enter new principal offices address, if applicable:		2022 SEC
(Principal office address MUST BE A STREET ADDRESS)		20 <b>27 71</b>
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office are agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:	ddress on our records, enter the nar	C-6 AH 9: 22  me of the new registered
	. Florida	
	Сiţ	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agre- provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as pr being filed to merely reflect a change in the registered office of company has been notified in writing of this change.	performance of my duties, and I am rovided for in Chapter 605, F.S. Or	familiar with and ; if this document is

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>	<u>Name</u>	<u>Address</u>	Type of Action
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			□Remove
			□Change
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· 1 - 111			□Add
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Effective date, if other than the (If an effective date is listed, the date in Note: If the date inserted in this I document's effective date on the list.	ust be specific and ca block does not mee	mnot be prior to da et the applicable			
the record specifies a delayed effection of is filed.	ive date, but not an	n effective time, ;	it 12:01 a.m. on the	eartier of: (b) The S	90th day after the
Dated 12/06	<u> </u>	2022			
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		moer or authorized	representative of a m	emper	
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