## L22000519680

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
(Requestor's Name)  (Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  entified Copies Certificates of Status  Special Instructions to Filing Officer:	MAIL	
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



700319747627

01/17/23--01014--004 \*\*25.00



## **COVER LETTER**

TO: Registration Se Division of Cor				
	MARKETING TEAM, LLC			
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Sam Downs			
		Name of Person		_
		Firm/Company		a
	4408 Thistleberry Dr			_
		Address		2023 Sin
	Melbourne, FL 32935	0: 0: 12: 0:1		
	Sam@lvlupmarketingteam.	City/State and Zip Code		4
	=	to be used for future annual report no	otification)	
For further information of	oncerning this matter, please e	ali:		
Sam Downs		757 206-5461		<u> </u>
Name o	f Person		ime Telephone Numbe	er
Enclosed is a check for t	he following amount:			
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certifie	ate of Status &
Mailing Addres		Street Address: Registration S	Section	
Registration Section Division of Corporations		Division of C	orporations	
P.O. Box 632	27	The Centre of		910
Tallahassee,	FL 32314	2415 N. Mon	roe Street, Suite	910

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BET BE OF WINKE THAT TENDE	<del></del>
(Name of the Limited Liability Company as it now ap (A Florida Limited Liability Compa	pears on our records.) ny)
ne Articles of Organization for this Limited Liability Company were filed on orida document number 1.22000519680	$\frac{91/93/2023}{2}$ 12 12 2 and assigned
This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liability company here:  The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."  Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)  Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office address on our records, enter the name of the new register agent and/or the new registered Agent:  Name of New Registered Agent:  New Registered Office Address:	
If amending name, enter the new name of the limited liability compan	y here:
new name must be distinguishable and contain the words "Limited Liability Company,"	the designation "LLC" or the abbreviation "L.L.C."
ter new principal offices address, if applicable:	
rincipal office address MUST BE A STREET ADDRESS)	70.
	2
tor now mailing address if applicables	<u> </u>
•	
ailing address MAY BE A POST OFFICE BOX)	<del></del>
	0/A
	ur records, <u>enter the name of the new regist</u>
Name of New Registered Agent:	
	Florida street address
	, Florida
City	Zip Code

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

LEVEL HE MARKETING TEAM 110

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>	Name	Address	Type of Action
MGR	Sam Downs	4408 Thistleberry Dr Melbourne, Fl. 32935	<b>=</b> Add
			□Remove
			□Change
<del></del>			
			□Remove
			□Change
			Add Silver
			□Remove
			_ □Change
			B∧dd
			□Remove
			[]Change
			□Add
			□ Remove
			□Change
			□Add
			□Remove
			☐ Change

			•		_
	<u>.                                    </u>		<del></del>		_
					_
<del></del>				<del></del>	_
	<del></del>		· · · · · ·		
			<del></del>		
			**		
			· · · · · · · · · · · · · · · · · · ·		_
					_
	<u>,</u>	<del></del>			_
					_
<del> </del>					_
					_
	<del></del>		<u> </u>		
Effective date, if other than the	e date of filing:		(optiona	l)	
If an effective date is listed, the date mu	st be specific and cannot be prior t	o date of filing or more	than 90 days after filir	ig.) Pursuant to 6	505.02
Note: If the date inserted in this b document's effective date on the D	lock does not meet the applica Department of State's records.	bie statutory illing i	equirements, this da	ie will not be n	isicu
	•				
e record specifies a delayed effective	ue date but not an affective tie	ne at 12:01 a.m. on	the carlier of: (b)	The 90th day a	fter th
ord is filed.	ve date, but not an encenve in	ic, at 12,01 a.m. on	]:	2023	
			r	(3 C)	
January 9	2023		: 12		
Dated	·	<b>- '</b>			
			<u>:-</u>		
			<del>-</del> . ·		-

Typed or printed name of signee