123000016782

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



200409728852



2023 July - 6 PH 6: On

e FRANCIN

COVER LETTER

Tallahassee, FL 32314

	Registration S Division of Co						
SUBJEC		MARKETING SOLUTIONS LE	.c				
SOBJEC	.li	: Name of Limited Liability Company					
The encl	osed Articles of	f Amendment and fee(s) are sub	onlitted for tiling.				
Please re	turn all corresp	ondence concerning this matter	to the following:				
		EDUARDO JOSE BARR	IOS SOTILLO				
			Name of Person				
		CARSO MARKETING S	OLUTIONS LLC				
			Firm/Company				
		504 SUNSET VIEW DR					
			Address				
		DAVENPORT FLORIDA	. 33837				
			City/State and Zip Code				
		EDUARDOJBARRIOS@C					
			to be used for future annual report no	otification)			
For furth	er information (concerning this matter, please c	all:				
EDUAR	DO JOSE BAR	RIOS SOTILLO	321 3671432				
	Name o	of Person	at () Area Code Dayti	me Telephone Number			
Enclosed	l is a check for t	he following amount:					
■ \$25. 0	00 Filing Fee	☐ \$30.00 Fiting Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)			
	Mailing Addre Registration		Street Address:	action			
	Division of C		Registration S Division of Co				
	P.O. Box 632		The Centre of				

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CARSO MARKETING SOLUTIONS LLC		
(Name of the Limited Liabili (A Florida	ty Company as it now appears on our records.) a Limited Liability Company)	
he Articles of Organization for this Limited Liability C	Company were filed on JANUARY 09 2023	and assigned
Torida document number L23000016782		
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the lim	ited liability company here:	
		29
he new name must be distinguishable and contain the words "Lim	ited Liability Company," the designation "LLC" or the	abbreviation-L.L.C."
inter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDR	RESS)	6
		PH
		. ė
nter new mailing address, if applicable:		90
Mailing address MAY BE A POST OFFICE BOX)		
		-
. If amending the registered agent and/or registered	d office address on our records, <u>enter the na</u>	me of the new registe
gent and/or the new registered office address here:		
Name of New Registered Agent:		
Name of New Registered Agent.		
New Registered Office Address:	Enter Florida street address	
	r.nier r ioriaa street address	
	, Florida	Zin Code
	C IO.	/ 111 E /1/1P

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
MGR	Eduardo Jose Barrios Sotillo	956 Flower Fields LN, Orlando FL 32824	≣ Add
			□Remove
			□ Change
MGR	EDUARDO BARRIOS		□Add
		956 Flower Fields LN, Orlando FL 32824	≣Remove
			Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			□ Change
			□Add
			□Remove
			□Change
			□Add
			□Remove

I need to have the full nan	ne in the manager field because the bank asks me to open an account.
The full name of the regis	stered agent and manager is EDUARDO JOSE BARRIOS SOTILLO. Thank you so muc
	70
	ن ن ن
	1
ctive date, if other than t	the date of filing: (optional)
e: If the date inserted in this	must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 6 s block does not meet the applicable statutory filing requirements, this date will not be lie Department of State's records.
ord specifies a delayed effectiled.	ctive date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day af
JUNE 02	2023
	Bhub ho

Typed or printed name of signee