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2023 MAR -9 PM 12: 16 SECRETARY OF STATE

A. RIVERS MAY - 6 2023

COVER LETTER

TO:	Registration Sc Division of Cor						
SUBJEC	CT:	WORTH	DOING	MARK	ETING,	LLC	
			Name of Lin	nited Liability Co	этрапу		
The enc	losed Articles of	Amendment ar	id fee(s) are sub	omitted for filin	g,		
Please re	eturn all correspo	ndence concer	ning this matter	to the followir	ıg:		
			HOS	EA HA	LL		_
				Name of	Person		
		WC	IRTH DO	ING M	ARKETI	NG, LLC	
				Firm/Co			
		2200	N. COM	IMERCE	PKMY	SUITE 200	ı
				Addr	ress		
			WESTO	N, FL	33326	•	
				City/State and	•		_
					38@ GMA		
Car Gard	and the Comment of the Co				nate annual (ejkon	monneadon)	
COL INTII	ner information e	oncerning this	matter, prease c				
	HOSEA	HALL		at (7 !	54, 26	11 - 3147 ytime Telephone Numb	
	Name o	l Person		Area	Code Da	ytime Telephone Numb	
Enclosed	Lis a check for th	e following an	ount:				
₹ \$25.	00 Filing Fee	S30.00 F Certifie	iling Fee & ate of Status	Certifie	Filing Fee & d Copy al copy is enclosed)	Certifie	ate of Status &

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327

Tallahassee, FL 32314

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

		EKETING,	LLC		
(Name of the Limited (A	Liability Company a Florida Limited Liabi	s it now appears on ou lity Company)	r records.)		
The Articles of Organization for this Limited Liab Florida document number \(\bigcup_230006385\)		re filed on02	03 2023	and ass	igned
This amendment is submitted to amend the follow	ring;				
A. If amending name, enter the new name of the NAME The new name must be distinguishable and contain the work.					P1-2-1
		ompany," the designati			
Enter new principal offices address, if applicat	_	NA			
(Principal office address MUST BE A STREET	ADDRESS)				
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO		A \ N			
The state of the s					
B. If amending the registered agent and/or reg agent and/or the new registered office address	<u>here</u> :		, <u>ent</u> er the nar	ne of the new	3
Name of New Registered Agent:	HOSE	EA HALL		<u> </u>	
New Registered Office Address:	2200 N.	COMMERCE	PKMY	#2 <u>00</u>	3 -
		Enter Florida stree	t address	0.5	<u>-</u> -
	NESTON	_	, Florida	33326	<u>5</u>
		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
MGR	HOSEA HALL	2200 N COMMERCE PRWY	<u>+</u> 200 _ □Add
			ERemove
			Change
			_ □Add
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Note:	ve date, if other than the date of filing:
e recor rd is fil	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the ed.
Dated _.	3.6.23 Signature of a member or authorized representative of a member
	HOSEA HALL Typed or printed name of signee

Filing Fee: \$25.00