Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000240533 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

Ta:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name ; LEGALZOOM.COM INC.

Account Number : I20010000062 : (323)962-8600

Fax Number : (323)389-0502

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 **MARTINO LLC**

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$55.00

Electronic Filing Menu Corporate Filing Menu

Help T. LEMIEUX

JUL 1 1 2023

COV	/ER	LET	TER

	istration Sc ision of Cor	porations		i,	
SUBJECT:	MARTIN(LLC	•	. ,	•
SUBJECT:		Name of Lim	nited Linbility Company		
The enclosed	l Anicles of	Amendment and fee(s) are sub	mitted for filing.		
Please return	all correspo	ndence concerning this matter	to the following:		
		Cheyenne Moseley			
			Name of Person,	,	
		Legalzoom.com, Inc.	·		•
		· ·	Finn/Company		
		101 N Brand Blvd 11th Fl		,	
		 	Address		
		Glendale, CA 91203	٠,		
			City/State and Zip Code		
		nussman0013@gmail.com			
		E-mail address: (to be used for future annual re	port notification)	
For further in	oformation co	oncerning this matter, please ca	all:		
Chevenne M	loseley		at ()	-0888	
	Name of	FPerson	Area Code	Daytime Telephone Number	
Enclosed is a	check_for_th	e following amount:			
□ \$25 00 F	iling Fcc	□ \$30.00 Filing Fee & Certificate of Status	■ \$55.00 Filing Fee & Certified Copy	□ \$60.00 Filin Certificate	

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Certified Copy (additional copy is enclosed)

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

(additional copy is enclosed)

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

111	^	TT	X10		1 ^
MA	м	11	NO	L	レし

(Name of the Limited Li (A F)	ability Company as it no orida Lunited Liability Co	w appears on our ompany)	records.)	· <u></u> •		
The Articles of Organization for this Limited Liabili Florida document number L23000295955	ty Company were file	d on <u>106/20/2023</u>		z an	d assigi	ned
This amendment is submitted to amend the followin	g:					
A. If amending name, enter the new name of the	limited liability com	gany here:				
The new name must be distinguishable and contain the words	Limited Linbility Compa	ny," the designation	"LLC" or the	abbreviatio	on "L, 1, C	1 15
Enter new principal offices address, if applicable	<u> </u>		_			
(Principal office address MUST BEA STREET A)	DDRESS)					
Enter new mailing address, if applicable:	-		· ,	» .		
Mailing address MAY BE A POST OFFICE BOX	2	9 99 9 100 Paris				
B. If amending the registered agent and/or r		ress on our re	cords, <u>ente</u>	the na	me-of	the n
egistered agent and/or the new registered direct	address here.				; == 	
Name of New Registered Agent:				<u></u>	دی	<u>, </u>
New Registered Office Address:				•	PM	r
	ı	inter Florida street	address	Ç. II	7	<u> </u>
			, Florida	• .	19	
	Ciņ		_,	Zip C	ode -	

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 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>	Address	Type of Action
AMBR	Lucie Pukanova		
	· · · · · · · · · · · · · · · · · · ·	7051 Environ Blvd., Apt. 631, Lauderhill, FL 33319	B Add
			Change
			□ Add
			Remove
			Change
	,		🗆 Remove
			Change
			🗆 Remove
			Change
			🗆 Add
			Петюvе
			Change
			🗆 Add
			Remove
			☐ Change

	. , , , Page: 6 of 6	2023-07-10 05:50·27 PDT	LegalZoom.com, Inc.	
D. If a	amending any other informati	ion, enter change(s) here: (Attac	h additional sheets, if necessary.)	
		 		
	<u> </u>			
				
				 ·
				
				
		-		
	· · · · · · · · · · · · · · · · · · ·			
E. Eff	ective date, if other than the d	late of filing	(antional)	
(If ar	reffective date is listed, the date must i	be specific and cannot be prior to date of f	(optional) illing or more than 90 days after filing.) Pursuant to	605 020
	cument's effective date on the Dep		ory filing requirements, this date will not be	nsied a
If the (b) T	record specifies a delayed he 90th day after the reco	effective date, but not an efferd is filed.	ective time, at 12:01 a.m. on the ea	arlier o
	ed	a ath		

Richari

Page 3 of 3

Jacob Rusty Martino

Filing Fee: \$25.00

Signature of a member or authorized representative of a member

Typed or printed name of signee