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Division of Corporations

Email Address:___

Fax Number : (850)617-6383

From:

Account Name : VORAUS S&O LLC Account Number : 120220000166 Phone : (321)732-2022 Fax Number : (407)577-3447

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

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COVER LETTER

TO:	Registration S Division of Co	ection rporations					
SCRIFC	MARKED	ESING LLC					
ornare.	·	Name of Lit	nited Liability Company				
The enclo	sed Articles of	Amendment and fee(s) are su	emitted for filing.				
Please ret	urn all corresp	ondence concerning this matter	r to the following:				
		ABREU, JEINEZKA M					
		A Court of the Cou	Name of Person				
		*****	Firm/Company				
		4387 EAST MICHIGAN					
		Address					
		ORLANDO, FL 32812					
			City/State and Zip Code				
			to be used for future annual report not	fication)			
For furthe	r information e	oncerning this matter, please c	all:				
VORAUS	S&O LLC		321 7322022				
	Name о	f Person	at () Area Code Daytim	e Telephone Number			
Enclosed i	s a check for th	ne following amount:					
■ \$25.04) Filing Fec	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy tadditional copy is enclosed)			
	luiling Address	_	Street Address:				
	egistration S	section	Registration Sec	ction			

Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MARKEDESING LLC		
(Name of the Limited Liability Compa- (A Florida Limited L	ny as it now appears on our records.) Jiabihiy Company)	
The Articles of Organization for this Limited Liability Company	were filed on 06/28/2023	and assigned
Florida document number L23000310305		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the designation "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
	# 575 - 45 45 - 15 - 15 - 15 - 15 - 15 - 15	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
	The state of the s	
B. If amending the registered agent and/or registered office a	ddress on our records, enter the name	of the new registered
agent and/or the new registered office address here:		(:
Name of New Registered Agent:		7 .
New Registered Office Address:		<u>ئ</u> ت.
	Enter Florida street address	
		()

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.

Cin

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	ABREU, JEINEZKA M	4387 EAST MICHIGAN ST	□Add
		ORLANDO, FL 32812	□Remove
			居Change
		MV-, -, -, -, -, -, -, -, -, -, -, -, -, -	□Aĕd
			□Remove
			□ Change
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***			∐Add
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			□Remove
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			☐ Remove
			☐ Change

	`Page: 5 of 5	2023-07-27 18:47:18 GMT	14075773447	From: ELSY OLIVAR
D. If am	ending any other inform	nation, enter change(s) here: (Attach wie	ditional sheets, if necessary.)	
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Note:	If the date inserted in this	ne date of filing: 107/27/2023 Thust he specific and cannot be prior to date of filing or block does not meet the applicable statutory file Department of State's records.	(optional) r more than 90 days after filing.) Purse ling requirements, this date will n	ant to 605.0207 (3 kb) of be listed as the
	d specifies a delayed effect	ive date, but not an effective time, at 12:01 a.n.	n, on the earlier of: (b) The 90th	day after the
Dated	07/27	2023		

Note: If the date inserted	than the date of filing: (optional) (date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 695.0207 (in this block does not meet the applicable statutory filing requirements, this date will not be listed as it on the Department of State's records.
record specifies a delayed is filed.	effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Oated	2023
	JEINEZ Kor LL ABREY. Signature of a member or authorized representative of a member
ABREU, JEIN	
	Typed or printed name of signee