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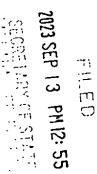
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COTERLETION

TO:	Registration Se Division of Cor			
	Melo Marti	nez Answering Services LLC		1
SUBJE	∪1; <u> </u>	Name of Lin	ited Liability Company	
The encl	losed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	eturn all correspo	ondence concerning this matter	to the following:	
		Jose Miguel Madrigal Mel	0	
			Name of Person	
		Melo Martinez Answering	Services LLC	
			Firm/Company	
		6413 Fletcher Steet		
			Address	
		Hollywood FI 33023	follywood FI 33023	
			City/State and Zip Code	
		info@melomartinezservices		
		E-mail address: (to be used for future annual report not	fication)
For furth	ner information o	concerning this matter, please c	all:	
Jose Mi	guel Madrigal M	elo	908 422-3045 at ()	
	Name o	f Person	Area Code Daytin	ne Telephone Number
Enclosed	d 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)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration	Section	<u>Street Address:</u> Registration Se	ection
	Division of C P.O. Box 632	•	Division of Co	•
	Tallahassee,		The Centre of 7 2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

ARTICLES OF O	RGANIZATION	
OF	7	2023 SEP 13 PM 12:55
Melo Martinez Answering Services LLC		SCRIET 13 PMA
(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our reability Company)	cords.)
The Articles of Organization for this Limited Liability Company vi Florida document number L23000366040	were filed on 08/03/2023	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	ity company here:	
The new name must be distinguishable and contain the words "Limited Liabilit	y Company," the designation '	'LLC" or the abbreviation "L.L.C."
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 ac agent and/or the new registered office address here:	idress on our records, <u>ei</u>	nter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		•
	Enter Florida street a	ddress
	City	, Florida
New Registered Agent's Signature, if changing Registered Agent:	City	Σιρ Colle
I hereby accept the appointment as registered agent and agre- provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as po- being filed to merely reflect a change in the registered office of company has been notified in writing of this change.	performance of my dutie rovided for in Chapter 6	s, and I am familiar with and 105. F.S. Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AP	Jose Miguel Madrigal Melo	6413 Fletcher Street Hollywood Fl 33023	
			□ Remove
			□ Change
			□Remove
			□Change
			□Add
			□Remove
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		-	🗆 Add
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If an effec <u>Note:</u> If	re date, if other than the date of filing: (optional) (optional) (itive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.03 fithe date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed int's effective date on the Department of State's records.
e record rd is filed	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 d.
-	eptember 05 (2023)
Dated _	Malin
S Dated _	Signature of authorized representative of a member

Filing Fee: \$25.00