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Madelynn Markle Daytime Telephone Number Name of Person Enclosed is a check for the following amount: **■** \$25.00 Filing Fee ☐ \$30.00 Filing Fce & ☐ \$55.00 Filing Fee & □ \$60.00 Filing Fee. Certificate of Status & Certificate of Status Certified Copy Certified Copy (additional copy is enclosed) (additional copy is enclosed) Street Address: **Mailing Address:**

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

nor turmer information concerning this matter, please can:

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

COVER LETTER

Division of Corporations Markle Management, LLC SUBJECT: Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Madelynn Markle Name of Person Markle Management Firm/Company 17444 East Road Address Umatilla, FL 32784 City/State and Zip Code madelynnmarkle@gmail.com E-mail address: (to be used for future annual report notification)

TO:

Registration Section

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Markie Management, LLC		
(Name of the Limited Liability Compa (A Florida Limited	iny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number 900418514539	were filed on 11/07/2023	and assigned
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" of	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)		
3. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter th</u>	e name 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	<u> </u>
	Liuci i wiaa mieci aaarem	
	, Flor	ida Ziv Code
	Cuv	гар Соис

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
MGR	Cody Markle	17444 East Road	□Add
		Umatilla, FL 32784	Remove
			■Change
			□Add
		-	□Remove
			□Add
			□Remove
			Change
			□Add
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