

11/27/23, 12:17 PM

Division of Corporations

H230004047903

L230004047903  
Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To: Division of Corporations  
Fax Number : (850)617-6383

From: Account Name : DEALER CONSULTING SERVICES, INC.  
Account Number : 120010000121  
Phone : (305)758-9001  
Fax Number : (786)410-6035

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

Email Address: CORPORATIONS@DCS-NETWORK.COM

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
MS MARKETING LLC

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### COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: MS MARKETING LLC**

\_\_\_\_\_  
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:

JADE MARTINEZ

\_\_\_\_\_  
Name of Person

DEALER CONSULTING SERVICES INC

\_\_\_\_\_  
Firm/Company

7537 NW 7TH AVE

\_\_\_\_\_  
Address

MIAMI, FL 33150

\_\_\_\_\_  
City/State and Zip Code

CORPORATIONS@DCS-NETWORK.COM

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JADE MARTINEZ

305 758-9001  
at ( )

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

Enclosed is a check for the following amount:

\$25.00 Filing Fee

\$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  
(additional copy is enclosed)

**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

#230004047903

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MS MARKETING LLC

(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 11/09/2023 and assigned Florida document number L23000509854

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable: 9521 E BAY HARBOR DR UNIT 503 BAY HARBOR ISLAND, FL, 33154

Enter new mailing address, if applicable: 9521 E BAY HARBOR DR UNIT 503 BAY HARBOR ISLAND, FL, 33154

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: MAHYAR SOLTANI AZAD
New Registered Office Address: 9521 E BAY HARBOR DR UNIT 503
BAY HARBOR ISLAND, Florida 33154

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.

DocuSigned by: [Signature]

If Changing Registered Agent, Signature of New Registered Agent

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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>	<u>Address</u>	<u>Type of Action</u>
MGR	MAHYAR SOLTANI AZAD	9521 E BAY HARBOR DR UNIT 503	<input type="checkbox"/> Add
		BAY HARBOR ISLAND, FL, 33154	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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