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## **COVER LETTER**

.

TO:

TO:	Registration Sect Division of Corpo					
CHBIE	con.	GEN-Y MARKETI	NG CONSULTAN	IT SER	RVICES LLC	
SUBJE		Name of Lim	ited Liability Company			
The en	closed Articles of A	mendment and fee(s) are sub-	mitted for filing.			
Please	return all correspond	dence concerning this matter	to the following:			
			Sonia Becerra			
			Name of Person			
			Swyft Filings			
			Firm/Company			
			3 Greenway Plaza #	1320		
		-	Address		<del></del>	
			Houston, TX 770	)46		
			City/State and Zip Coo	le		
			@legalcorpsolution to be used for future annu-			
For fur	ther information co	e-mail address: ( acerning this matter, please o		ш тероте	nonneanon)	
		, , , , , , , , , , , , , , , , , , , ,				
	Sonia Bed Name of I		at ()_ Area Code		77-0450	
	Name of t	Cison	ruta code		Total Control Control	
Enclos	ed is a check for the	following amount:				
<b>™</b> \$2	5.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fo Certified Copy (additional copy is		☐ \$60.00 Filing Fee, Certificate of State Certified Copy (additional copy is enc	
	Mailing Address: Registration Section of Co P.O. Box 6327 Tallahassee, Fl	ection rporations	Regis Divis The C 2415	ion of C Centre o N. Mor	Section Corporations of Tallahassee nroe Street, Suite 810 FL 32303	

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

## GEN-Y MARKETING CONSULTANT SERVICES LLC

( <u>Name of the Limited Liability Compar</u> (A Florida Limited L	y as it now appearability Company)	rs on our records.)	<del></del>		
The Articles of Organization for this Limited Liability Company  Florida document number		12/04/2023	and assigned		
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liabi	lity company h	ere:			
Altidor Marketing Consulta					
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the o	lesignation "LLC" or the al	obreviation "L.L.C."		
Enter new principal offices address, if applicable:					
(Principal office address MUST BE A STREET ADDRESS)			<u> </u>		
			<u> </u>		
			28		
Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE BOX)			<u> </u>		
			<u> </u>		
			52 7		
B. If amending the registered agent and/or registered office a	ddress on our i	records, enter the nan	ne of the new registered		
agent and/or the new registered office address here:					
Name of New Registered Agent:					
rane of few registers rigen.		<u> </u>			
New Registered Office Address:	Enter Flo	rida street address			
	City	, Florida	Zip Code		
New Registered Agent's Signature, if changing Registered Agent:	-				
	an to not in this	annuaity I further as	rea to comply with the		
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete	ee to act in this performance o	capacity. I Juriner ag f my duties, and I am	ree to compty with the familiar with and		
accept the obligations of my position as registered agent as p	provided for in	Chapter 605, F.S. Or	, if this document is		

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 Type of Action **Title** Name Address  $\Box$ Add \_\_\_\_\_ Remove \_\_\_\_\_ Change □Add \_\_\_\_\_ 🗔 Remove ☐ Change \_\_\_\_\_\_ DRemove \_\_\_\_\_ □Change \_\_\_\_\_ □Add \_\_\_\_\_ □Remove \_\_\_\_\_ □Change \_\_\_\_\_ □Add \_\_\_\_\_ □Remove \_\_\_\_\_ □Change \_\_\_\_\_ □Add \_\_\_\_\_ □Remove

\_\_\_\_\_ □Change

If amendin	g any other information, enter change(s) here: (Attach additional sheets, if necessary.)
-	
** ** *****	
Effective d	ate, if other than the date of filing:
If an effective Note: If the	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 605.0207 date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as effective date on the Department of State's records.
e record spec rd is filed.	cifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	12/20/202;
X _	AHINGS
Λ-	Signature of a member or authorized representative of a member
	Jean Michel Altidor
-	Typed or printed name of signee

Filing Fee: \$25.00