

L24000264872

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

From: Account Name : ALL7 SERVICE LLC
Account Number : 120240000077
Phone : (407)970-8143
Fax Number : (689)218-0977

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

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
ALVESUS DIGITAL MARKETING LLC

Certificate of Status	0
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Electronic Filing Menu

Corporate Filing Menu

Help

K. SALY
AUG - 8 2024

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

ALVESUS DIGITAL MARKETING LLC

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

FILED
2024 AUG -7 AM 3:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 02.05.2024 and assigned Florida document number L24000064362.

This amendment is submitted to amend the following:

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

N/A

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:

N/A

(Principal office address MUST BE A STREET ADDRESS)

N/A

N/A

Enter new mailing address, if applicable:

N/A

(Mailing address MAY BE A POST OFFICE BOX)

N/A

N/A

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:

N/A

New Registered Office Address:

N/A

Enter Florida street address

N/A

Florida

City

Zip Code

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>	<u>Address</u>	<u>Type of Action</u>
MGR	HUDSON AMORIM DE AMARA	1110 Constance Rd, Apt 302, Orlando, FL 32826	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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2024 AUG -7 PM 3:53
CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

I am adding the administrator HUDSON AMORIM DE AMARAL

who has the address 1110 Constance Rd, Apt 302, Orlando, FL 32826

2024 AUG -7 AM 3:58
SECTION 1
FILED

E. Effective date, if other than the date of filing: 08/06/2024 (optional)

(If an effective 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 608.0207(3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated ORLANDO 6TH AUGUST , 2024



Signature of a member or authorized representative of a member:

AMBR SAMUEL ALVES COSTA

Typed or printed name of signer