

(Re	equestor's Name)	
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(Cit	ly/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Name)	
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Certified Copies	Certificates	of Status
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Special Instructions to Filir	ng Officer:	

Office Use Only







ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Sigma Marketing LLC		
(<u>Name of the Limited Liability C</u> (A Florida Lin	ompany as it now appears on our records.) nited Liability Company)	
The Articles of Organization for this Limited Liability Com	pany were filed on 03/22/2024	and assigned
Florida document number L24000141320		· — •
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
Sigma Marketing Group LLC		
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:		7.
Principal office address MUST BE A STREET ADDRES	<u> </u>	
		τ. ,
Enter new mailing address, if applicable:		13
(Mailing address MAY BE A POST OFFICE BOX)		:
Maning address WITT BE AT OST OFFICE BOX		TO 10
3. If amending the registered agent and/or registered of agent and/or the new registered office address here:	fice address on our records, enter the na	me of the new regis
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	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 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
			□ Add
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			☐ Change
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f an effectiv	e date is listed, the dat	the date of filing: te must be specific and o	annot be prior to d	ate of filing or more th	(optiona an 90 days after filin	l) g.) Pursuant to 605.0207
<u>Note:</u> If th	ne date inserted in th	his block does not me the Department of Sta	eet the applicable	statutory filing req	uirements, this da	e will not be listed as
		·				
e record sp ed is filed.	ecifies a delayed eff	ective date, but not a	n effective time,	at 12:01 a.m. on th	e earlier of: (b)	The 90th day after the
04/0 Dated	02/2024		·			
	/s/ Sabah Karimi					
		Signature of a me	ember or authorize	d representative of a	nember	