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(Requestor's Name)
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PICK-UP WAIT MAIL
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COVER LETTER

TO: Registration Se Division of Cor			
IM Multicu	ltural Marketing LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	indence concerning this matter	to the following:	
	Isaac Mizrahi		
		Name of Person	
	IM Multicultural Marketin	g LLC	
		Firm'Company	
	7800 SW 132nd ST		
		Address	
	Miami, FL 33156		
		City/State and Zip Code	
	isaacmizrahi38@gmail.con	to be used for future annual report not	(feedian)
For further information c	oncerning this matter, please c		The street of th
Isaac Mizrahi		70.3 898-2580 Area Code Daytin	
Name o	f Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy radditional copy is enclosed)
Mailing Address Registration (Street Address: Registration So	ection
Division of C	orporations	Division of Co	rporations
P.O. Box 632 Tallahassee,		The Centre of 2415 N. Monro	Fallahassee oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

IM Multicultural Marketing LLC		
(<u>Name of the Limited Liability Co</u> (A Florida Lim	ompany as it now appears on our recor ited Liability Company)	rds.)
The Articles of Organization for this Limited Liability Comp	pany were filed on 4/19/2024	and assigned
Florida document number 1.24(00)186324		
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 I	Liability Company," the designation "LL	.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS	<u> </u>	
		<u> </u>
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
		<u>(/)</u>
		<u> </u>
B. If amending the registered agent and/or registered off agent and/or the new registered office address here:	fice address on our records, <u>entc</u>	er the name of the new registere
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addi	PSSS
		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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Isaac Mizrahi	7800 SW 132nd ST, Miami, FL 33156	■Add
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			□ Change
			🗆 Add
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Miami May 15th 202 Signature of a member or authorized representative of a member						
Signature of a member or authorized representative of a member	Miami		May 15th 20	n		
Signature of a member or authorized representative of a member	. * 1 (4) 1111	<u> </u>	_ `	<u>-</u>		
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Filing Fee: \$25.00