P2400016292

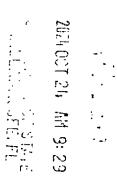
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10/24/24--01021--001 **43.75



AD

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: Marketing Soutions	<u> </u>				
	IBER: P24000016292					
The enclosed Article	s of Amendment and fee are sub	omitted for filing.				
Please return all corr	espondence concerning this mat	ter to the following:				
	Ryan Burgard					
	Name of Contact Person Marketing Soutions Firm/ Company					
	12 Bellis et					
		Address	9S			
	Homosasaa, FL 34446					
	City/ State and Zip Code					
ryanburgard@gmail.com						
	· · · · · · · · · · · · · · · · · · ·	ed for future annual report	notification)			
For further informati	on concerning this matter, pleas	e call:				
Brandy Burgard		at (352	, 2961170			
Name	of Contact Person	at (352) 2961170 Area Code & Daytime Telephone Number				
Enclosed is a check t	for the following amount made p	payable to the Florida Depa	artment of State:			
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
An Di P.C	nendment Section vision of Corporations D. Box 6327 Hahassee, FL 32314	Amend Division The Co 2415 Y	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303			

Articles of Amendment to Articles of Incorporation of

Marketing Southons FL 106.	250
(Name of Corporation as currently	y filed with the Florida Depth of State)
P24000016292	AT 50 1 24 AM 9: 29
(Document Number of Pursuant to the provisions of section 607.1006, Florida Statutes, this a its Articles of Incorporation:	Corporation (if known)
A. If amending name, enter the new name of the corporation:	
Marketing Solutions FL Inc.	The new
name must be distinguishable and contain the word "corporation," "e "Inc.," or Co.," or the designation "Corp," "Inc." or "Co". A "chartered," "professional association," or the abbreviation "P.A."	company," or "incorporated" or the abbreviation "Corp.,"
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address	ress in Florida, enter the name of the
new registered agent and/or the new registered office address:	
Name of New Registered Agent	
(Florida Mr	ver address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	with and accept the obligations of the position.
Signature of New Re	egistered Agent, if changing
Check if applicable	Water the second

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Example:

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	<u>PT</u>	<u>John Do</u>	<u>oc</u>	
X Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>SV</u>	Sally Sn	nith	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) Change	<u>v</u> _	_	Brandy Burgard	12 Bellis Ct
X Add				Homosassa, Fl 34446
Remove				
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add				
Remove				

(Attach additional sheets, if necessary).	ticles, enter change(s) here: (Be specific)
	
,,,,	
If an amendment provides for an exchange of an exchange of a second of the second of t	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
yan 50% Shareholder	
randy 50% Shareholder	

The date of each amendment(s) ac	option: 10/10/24	, if other than th
date this document was signed.		
Effective date if applicable: 10/1		
	(no more than 90 days after amendment file date,)
Note: If the date inserted in this b document's effective date on the De	ock does not meet the applicable statutory filing requirement partment of State's records.	ts, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add action was not required.	pted by the incorporators, or board of directors without shareh	older action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes cast for the am Nicient for approval.	endment(s)
	roved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendment	
"The number of votes east	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
10-10	7-714	
Dated		
Signature	ector, president or other officer if directors or officers have	not been
	, by an incorporator – if in the hands of a receiver, trustee, or of	
	ed fiduciary by that fiduciary)	
	(Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
	$\mathcal{D} \rightarrow \mathbf{A} \mathbf{a} \mathbf{b}$	
	Tresillarit	
	(Title of person signing,	