# 105000038680

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TO THE SECTION OF THE

OCT 18 70th RIS

# **COVER LETTER**

TO: Registration' Section Division of Corporation (Corporation Corporation)			
SUBJECT:	igh Concept Name of Limit	Media, LL C ed Liability Company	<del></del>
The enclosed Articles of An	nendment and fee(s) are subm	nitted for filing.	
Please return all corresponde	ence concerning this matter to	o the following:	
	<u></u>	lenn Bossik Name of Person	
	High	h Concert Media	yllc_
	1209 Asi	bun y Wax Address	
	Boynton	Beach, FL 33 City/State and Zip Code	426
	· ·	o be used for future annual report noti	
For further information cond	cerning this matter, please cal	N:	
Glenn Bos Name of Po	es.K	at (561) 385- Area Code Daytim	7264 e Telephone Number
Enclosed is a check for the	îollowing amount:		
\$25.00 Filing Fee  Alvealy  Sent	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

## MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

### STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



### FLORIDA DEPARTMENT OF STATE **Division of Corporations**

October 5, 2016

HIGH CONCEPT MEDIA, LLC 1209 ASBURY WAY BOYNTON BEACH, FL 33426

SUBJECT: HIGH CONCEPT MEDIA, LLC

Ref. Number: L05000038680



We have received your document for HIGH CONCEPT MEDIA, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Cover letter, page 2 and page 3 is missing.

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris Regulatory Specialist II

Letter Number: 016A00021488

please see attached and amended.

Firms. Note that your forms are extremely confusing.

Alenn Bossik High Concept Medin, LLC

www.sunbiz.org

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

High Concept Media, LLC			<del></del>	
(Name of the Limi	ted Liability Company as it now appear (A Florida Limited Liability Company)	rs on our records.)		
The Articles of Organization for this Limited L Florida document number		/20/2005	_ and assigne	×d
This amendment is submitted to amend the following	lowing:			
A. If amending name, enter the new name of	of the limited liability company he	ere:		
The new name must be distinguishable and contain the	words "Limited Liability Company," the d	lesignation "LLC" or the abbre	viation "L.L.C."	•
Enter new principal offices address, if applic	cable:			
(Principal office address MUST BE A STREI	ET ADDRESS)			
			ಕ್ 🧎	- 1
			0.01	. [1] 2]
Enter new mailing address, if applicable:			; 	
• • • • • • • • • • • • • • • • • • • •			***************************************	<del></del>
Mailing address MAY BE A POST OFFICE	<u> </u>		<u></u>	<u> </u>
	<del> </del>		<u>~~~</u>	<u>``</u>
B. If amending the registered agent and registered agent and/or the new registered of		our records, <u>enter th</u>	æ	he ne
Name of New Registered Agent:				
New Registered Office Address:	1209 Asbury Way			
	Enter Flor	rida street address	· ,	
	Boynton Beach	, Florida	i	
	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>	Address	Type of Action
	Offe		□ Add
			□ Remove
			☐ Change
			☐ Remove
			□ Change
			Add
			□ Remove
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	<del></del>		Add
			🗆 Remove
			Change
			a Ader
			Remove
		·	Change de la company de la com
			Remove
			□ Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary)	essary.)	
	····	
	<del> </del>	
E. Effective date, if other than the date of filing:  (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  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this document's effective date on the Department of State's records.	filing.) Pursuant to 605.02	207 (3)(b) as the
If the record specifies a delayed effective date, but not an effective time, at $12.01 a$ (b) The 90th day after the record is filed.	i.m. on the earlier	of:
Dated 10/14/16		
Ilen Brud	<b>16</b> €	, ' , ' , ' , ' , ' , ' , ' , ' , ' , '
Signature of a member or authorized representative of a member		en Gen
Gilenn Boss.' K Typed or printed name of signee		
	<b>့</b>	
Page 3 of 3	<b>2</b> 9	7

Filing Fee: \$25.00