412000153837

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FILED Nov 20, 2013 08:00 AM Secretary of State



COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Imperium Media LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jason Van Horne

Name of Person

Imperium Media LLC

Firm/Company

4911 Matteo Trail

Addres

Orlando, FL 32839

City/State and Zip Code

jasonvanhorne@me.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jason Van Horne

Name of Person

,410,903-7038

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

□ \$25.00 Filing Fee

■\$30.00 Filing Fee & Certificate of Status

□\$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

□\$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED Nov 20, 2013 08:00 AM Secretary of State

Imperium Media, LLC		
(Name of the Limited Lia (A Flo	ibility Company as it now appears on orida Limited Liability Company)	our records.)
The Articles of Organization for this Limited Liabi Florida document number <u>L12000153837</u>	lity Company were filed on Decel	mber 10 2912 and assigned
This amendment is submitted to amend the following	ng:	
A. If amending name, enter the new name of the	e limited liability company here:	
Genie Services, LLC		
The new name must be distinguishable and end with the "L.L.C."	e words "Limited Liability Company,"	the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable	e:	
(Principal office address MUST BE A STREET A	(DDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	<u>X)</u>	·
B. If amending the registered agent and/or registered agent and/or the new registered office		records, <u>enter the name of the new</u>
Name of New Registered Agent:		
New Registered Office Address:		77 - 1
	Enter I	lorida street address
-		, Florida
	City	Zīp 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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records: MGR = Manager MGRM = Managing Member **Type of Action** Address Title Name |

	n, enter change(s) here: (Attach additional sheets, if necessary.) I all lawful business, including but not limited to,
	e services, mobile spa, delivery and courier
<u></u>	application development and commercial
services.	
November 3	
Signah Jason Van Horr	ure of a member or authorized representative of a member)
	Typed or printed name of signer

Filing Fee: \$25.00