13000033252

(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



700265153727

10/09/14--01009--014 **25.00

14 OCT 13 PM 12: 20
SECRETARY OF STATE

OCT 1 4 2014

T. HAMPTON

COVER LETTER *
TO: Registration Section Division of Corporations
SUBJECT: MIAM Media Group 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:
Senryler Hernandez Name of Person
Miani Media Group LCC
444 Brickell ave, 760
Miani, F (33131
City/State and Zip Code City/State and Zip Code
For further information concerning this matter, please call:
Sennifer Hernandez at (305) 721-4714 Name of Person at (305) Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$30.00 Filing Fee \$\$ \$55.00 Filing Fee \$\$ \$60.00 Filing Fee, Certificate of Status \$\$ Certified Copy \$\$ Certificate of Status \$\$

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

Certified Copy (additional copy is enclosed)

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

(additional copy is enclosed)

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

M'ame of the Limited Liability Compa (A Florida Limited I	my as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L13000333</u> 5	were filed on 3/5/13 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab LO+10 AMUICAN MU The new name must be distinguishable and end with the words "Limited Liab	dia Group, LLC
Enter new principal offices address, if applicable:	- IA = = =
(Principal office address MUST BE A STREET ADDRESS)	A) HE S T
Enter new mailing address, if applicable: (<u>Mailing address MAY BE A POST OFFICE BOX)</u>	TARY OF STATE ASSEE, FLORIDE ASSEE, FLORIDE ASSEE, FLORIDE ASSEE ASSEE ASSEE ASSEE ASSEE A
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	
Name of New Registered Agent:	Α
New Registered Office Address:	
	Inter Florida street address , Florida
	City Zin 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 the Managers or Authorized Member on our records, <u>enter the title</u>, <u>name</u>, <u>and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = Manager

AMBR = Au	thorized Member		
<u>Title</u> MGR	Name Robert Thoma	Address 444 Brickell au, 76	Type of Action Add
,		Mianu, FC 33131	
MGR	Zachary Thome	444 Brickell aug,76 Miani, FL 33/31	Add□ Remove
		ALL AHASS	Remove OCT 13
		FLORIDA	Aged TO
			□ Add
			□ Remove
			□ Add
			_□ Remove

Effective date, if other than the date of filing: The effective date must be specific, cannot be prior to date of receipt or filed date and can the date this document is filed by the Florida Department of State)	(optional) not be more than 90 days after
Dated OCTO Der 3, 2014	
	ntive of a member

Page 3 of 3

Filing Fee: \$25.00

14 OCT 13 PN 12: 20
SECRETARY OF STATE
SECRETARY OF STATE