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SERVING STREET

MAY 1 4 2013 J. BRYAN

COVER LETTER

TO: Registration Section
Division of Corporations

BRECT: Garton-Miller 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:

Susan R. Miller

Name of Person

Garton-Miller Media, LLC

Firm/Company

17856 N.W. 15th Court

Address

Pembroke Pines, Fla. 33029

City/State and Zip Code

srmiller@gartonmillermedia.com

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

For further information concerning this matter, please call:

Susan R. Miller

,,,954,**258-765**6

Name of Person

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

Garton-Miller Media, LLC	
(Name of the Limited Liability Comp. (A Florida Limited	any as it new appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L.13000062136</u> .	y were filed on 4-29-2013 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lial	bility company here:
The new name must be distinguishable and end with the words "Lim"L.L.C."	tited Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	13 P
(Mailing address MAY BE A POST OFFICE BOX)	3
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address he	ffice address on our records, enter the name of the new re:
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, 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 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 Changing Registered Agent, Signature of New Registered Agent

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

<u>Title</u>	Name	Address	Type of Action
MGR	Susan R. Miller	17856 N.W. 15	oth Court Add
		PEMBroke PMBT	33029 Remove
			Add
			Remove
			E Bada T
			Remove 3:
			Add
			Remove
			Add
			Remove
			Add
			Remove

. If an	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
•	
ited _	May 10, 2013
	Signature of a member or authorized representative of a member
	Susan R. Miller Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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