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FILED

JAN 1 5 2015

T. BROWN

COVER LETTER

TO: Registration Section
Division of Corporations

Florida Petish Cam LLC

SUBJECT:

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:

	Suzanne D. Meehle	, Esq.	
		Name of Person	
	The Meehle Law Fir	m, P.A.	
		Firm/Company	
	115 Maitland Avenu	e	
		Address	
	Altamonte Springs,	FL 32701	
	-	City/State and Zip Code	
	suzanne@meehle.co	om	
	E-mail address: (to be used for future annual report not	ification)
For further information c	oncerning this matter, please c	all;	
Suzanne D. Meehl	е	407 792-0790)
Name o	f Person		ne Telephone Number
Enclosed is a check for th	ne 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**

ARTICLES	OF AMENDMENT
A DITIGUES O	TO :
ARTICLES	OF ORGANIZATION
	OF TOP S
Florida Fetish Cam LLC	OF AMENDMENT TO OF ORGANIZATION OF Company as it now appears on our records.) inited Liability Company)
(Name of the Limited Liability C	ompany as it now appears on our records.)
(A Florida Lin	nited Liability Company)
ne Articles of Organization for this Limited Liability Comp	pany were filed on 09/02/2014 and assemed
orida document number L14000136327	
orida document number	
nis amendment is submitted to amend the following:	
If amending name, enter the new name of the limited	liability company here:
lilner Worldwide LLC	rangest combant nere.
	d Liability Company," the designation "LLC" or the abbreviation "L.L.C."
e new name must be distinguishable and end with the words. Entitled	d Liability Company, the designation LEC of the appreviation L.E.C.
nter new principal offices address, if applicable:	
rincipal office address MUST BE A STREET ADDRES.	(S)
rincipal office address MUST BE A STREET ADDRES.	<u>'S)</u>
rincipal office address MUST BE A STREET ADDRES.	
nter new mailing address, if applicable:	<u></u>
nter new mailing address, if applicable:	
nter new mailing address, if applicable:	
rincipal office address MUST BE A STREET ADDRES. Inter new mailing address, if applicable: Aailing address MAY BE A POST OFFICE BOX)	
iter new mailing address, if applicable: <u>Sailing address MAY BE A POST OFFICE BOX</u>) If amending the registered agent and/or registere	ed office address on our records, enter the name of the new
nter new mailing address, if applicable: failing address MAY BE A POST OFFICE BOX)	ed office address on our records, enter the name of the new
nter new mailing address, if applicable: Sailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered agent and/or the new registered office address	ed office address on our records, enter the name of the new
nter new mailing address, if applicable: **Tailing address MAY BE A POST OFFICE BOX)** If amending the registered agent and/or registere	ed office address on our records, enter the name of the new
nter new mailing address, if applicable: Sailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered agent and/or the new registered office address	ed office address on our records, enter the name of the new
nter new mailing address, if applicable: Interval	ed office address on our records, enter the name of the new
nter new mailing address, if applicable: <u>Mailing address MAY BE A POST OFFICE BOX</u>) If amending the registered agent and/or registeregistered agent and/or the new registered office address <u>Name of New Registered Agent</u> :	ed office address on our records, <u>enter the name of the new</u>

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

Page 1 of 3

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

<u> Fitle</u>	<u>Name</u>	Address	Type of Action
			Add
			☐ Remove
			
			□ Remove
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			Add
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anctioning any other information, en	iter change(s) here: (Attach additional sheets, if neces	ssary.j
		
		
Fff. day 14 March and 14 March		
(The effective date, if other than the date of the effective date must be specific, cannot be price the date this document is filed by the Florida Dep	filling: (option or to date of receipt or filed date and cannot be more than 90 days after the filed date and 60 days after the filed date and 60 days after the filed date and 60 days a	nal) ter
Dated December 22, 2014	2014	
the date this document is filed by the Florida Dep	partment of State)	an 90 days af
Signatur	e of a member or authorized representative of a member	
_	q., Authorized Representative	
	Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00