

L190000 43016

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

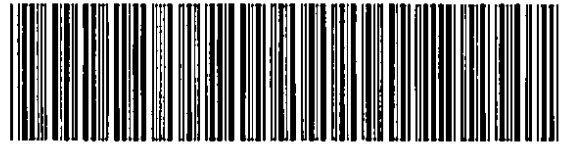
(Business Entity Name)

(Document Number)

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04/16/19--01017--002 **25.00

2019 APR 16 PM 10:15
211 2019 APR 16 PM 10:15

COVER LETTER

TO: Registration Section
Division of Corporations

2018 APR 16 AM 10:10

SUBJECT: ACTIONABLE 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:

Marilyn O'Leary

Name of Person

Firm/Company

2850 34th Street N, Unit 309

Address

St. Petersburg, FL 33713

City/State and Zip Code

dave@actionable.media

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

For further information concerning this matter, please call:

Marilyn O'Leary

866 203-2333

at ()

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

2019 APR 16 AM 10:43
FLORIDA
CLERK OF COURTS

ACTIONABLE MEDIA, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 2/11/2019 and assigned Florida document number L19000043016.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

2850 34th Street North

(Principal office address MUST BE A STREET ADDRESS)

Unit 309

St. Petersburg, FL 33713

Enter new mailing address, if applicable:

2850 34th Street North

(Mailing address MAY BE A POST OFFICE BOX)

Unit 309

St. Petersburg, FL 33713

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Marilyn O'Leary

New Registered Office Address:

2850 34th Street North, Unit 309

Enter Florida street address

St. Petersburg

Florida 33713

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>	<u>Address</u>	<u>Type of Action</u>
MGR	Jonathan Honig		<input type="checkbox"/> Add
		5825 Windsor Court Boca Raton, FL 33496	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Marilyn O'Leary	2850 34th Street N, Unit 309 St. Petersburg, FL 33713	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Lined area for amending information.

March 30, 2019

E. Effective date, if other than the date of filing: _____ (optional)

(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 filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(b) The 90th day after the record is filed.

Dated April 2, 2019

Handwritten signature of Marilyn O'Leary

Signature of a member or authorized representative of a member

Marilyn O'Leary

Typed or printed name of signee