## 21000350930

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
<del></del>
Special Instructions to Filing Officer:
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2022 MAR - 4 PM 12: 00 SECRET 137 OF 5 TATE

4.3/11/2022

## **COVER LETTER**

	Registration Se Division of Corp		1				
		FED UP MEDIA LLC  Name of Limited Liability Company					
SUBJEC	:1: <u></u>						
The encle	osed Articles of .	Amendment and fee(s) are sub	mitted for filing.				
		ndence concerning this matter					
		MEGHAN CONNOLLY					
		· · · · · · · · · · · · · · · · · · ·	Name of Person	<del></del>			
		SNOWBIRD SOCIAL LL	c				
		<del></del>	Firm/Company	<del></del>			
55 SE 6TH ST #2005							
Address							
MIAMI, FL 33131							
			City/State and Zip Code				
		MEG@MEGCONNOLLY					
			to be used for future annual report not	ification)			
For turth	er information c	oncerning this matter, please c	ali:				
MEGHA	AN CONNOLLY	<b>?</b> 	516 770-3807 at ()				
	Name o	f Person	Area Code Daytir	ne Telephone Number			
Enclosed	l is a ch <del>e</del> ck for tl	ne following amount:					
<b>■ \$</b> 25.	.00 Filing Fee	S30.00 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 Addres		Street Address:				
Registration Section			-	Registration Section Division of Corporations			
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314			The Centre of Tallahassee				
			2415 N. Monroe Street, Suite 810				

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2022 MAR -4 PM 12: 00

FED UP MEDIA LLC		CE3
(Name of the Limited L (A F	isbillity Company as it now appears on or forida Limited Liability Company)	IALLAHASSEE, FL
The Articles of Organization for this Limited Liabil	lity Company were filed on 8/4/2021	and assigned
Florida document number L21000350930		<del>-</del>
This amendment is submitted to amend the following	νδ: υδ:	
A. If amending name, enter the new name of the	e limited liability company here:	
The new name must be distinguishable and contain the words		
Enter new principal offices address, if applicable	=:\\ \17	
(Principal office address MUST BE A STREET A	IDDRESS)	
Enter new mailing address, if applicable: \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	<u></u>	s, enter the name of the new registered
agent and/or the new registered office address he		
Name of New Registered Agent:		
- I I I I I I I I I I I I I I I I I I I		
New Registered Office Address:	Enter Florida str	est arbitrare
	Draw I en mai du l	
_		, Florida
	City nith	Zip Code
New Registered Agent's Signature, if changing Regi	istered Agent; 141"	
I hereby accept the appointment as registered approvisions of all statutes relative to the proper a accept the obligations of my position as register being filed to merely reflect a change in the region company has been notified in writing of this change in the change	and complete performance of my d red agent as provided for in Chapt istered office address, I hereby cor	uties, and I am familiar with and er 605, F.S. Or, if this document is

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>	Address	Type of Action
MGR	SNOWBIRD SOCIAL LLC	55 SE 6TH ST #2005 MIAMI, FL 33131	■ Add
			□Remove
			Change
AMBR	KATHLEEN MIEDREICH	55 SE 6TH ST #2005 MIAMI, FL 33131	BAdd
		******	□Remove
			Change
			□Add
			□Remove
			☐ Change
			□ Add
			□ Remove
			Change
			□ Add
			□ Remove
			Change
			🗀 Add
			□ Remove
			□ Change

D. If amend	ling any other information, e	enter change(s) here	: (Attach additional sh	eets, if necessary.)	
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(If an effecti <u>Note:</u> If	e date, if other than the date ive date is listed, the date must be spetthe date inserted in this block do t's effective date on the Department.	ecific and cannot be prior to ses not meet the applica	to date of filing or more than the statutory filing requi	(optional) 190 days after filing.) Pursuant to 6 irements, this date will not be li	05.0207 (3)(b) isted as the
If the record s record is filed	specifies a delayed effective date,	but not an effective tir	ne, at 12:01 a.m. on the	earlier of: (b) The 90th day at	ter the
Dated	EBRUARY 25	2022			
	Megh	an a Co ure of a member of autho	nnolly	amba	
	MEGHAN A CONNOLLY		. 0		

Typed or printed name of signee