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(Requ	estor's Name)	
(Addre	ess)	
(Addre	ess)	
(City/S	State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Busin	ess Entity Nar	me)
(Docu	ment Number)	
Certified Copies	Certificates	s of Status
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COVER LETTER

· TO:

Registration Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Co	rporations		
LLC Name SUBJECT:	e Change: Catholic Crusade M		
Subject.	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sul	bmitted for filing.	
Please return all correspondent	ondence concerning this matter	r to the following:	
	Michael DiClaudio		
		Name of Person	
	Catholic Crusade Ministri	es	20
		Firm/Company	23 4
	2803 Gulf To Bay Blvd #	409	2023 114 23
		Address	
	Clearwater, FL 33759		F.1 9: 43
		City/State and Zip Code	<u> </u>
	catholiccrusademedialle@g	gmail.com	
	E-mail address:	to be used for future annual report notification	ation)
For further information of	concerning this matter, please of	eali:	
Michael DiClaudio		727 294-3796	
Name o	of Person	at () Area Code Daytime T	elephone Number
Enclosed is a check for the	he following amount:		
S25.00 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 Addres Registration S		Street Address: Registration Section	an
Division of C		Division of Corpo	

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MJAD Enterprises, ELC			
(Name of the Limited Liability Compa (A Florida Limited	any as it now appears on our records.)		
		2023	
The Articles of Organization for this Limited Liability Company	and assigned.		
Florida document number L22000021318		۰۰ شمئر ۲۰۵	
		72	
his amendment is submitted to amend the following:			
If amonding name opton the navy name of the limited light	ilian annua kana	13 9: 43	
A. If amending name, enter the new name of the limited liab	mity company nere:	Ę	
Catholic Crusade Media, LLC			
he new name must be distinguishable and the words "Limited Liabi	lity Company," the designation "LLC" or th	e abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	2803 Gulf To Bay Blvd #409		
Principal office address MUST BE A STREET ADDRESS)	Clearwater, FL 33759	-	
Enter new mailing address, if applicable: <u>Mailing address MAY BE A POST OFFICE BOX)</u>	2803 Gulf To Bay Blvd #409 Clearwater, FL 33759		
3. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the n	ame of the new register	
gent and/or the new registered office address here.			
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 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 = N AMBR = A	fanager Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			🗆 Add
			□Remove
			□Change
			□Add
	8		□Remove
			Chinge
			DA(b)
			CIRemove .
			— □Remove . —
			□Add
			□Remove
			□Change
			□Add
			□Remove
			Change

_____ □Add

_____ □Remove

Page 2 of 3

Page 2 of 3	
D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
(Allach daditional sheets, if necessary.)	
	 -
	 _
0.	3 3 3 -
	= 7
	3
	1 9 1 3 1 3 1 3 1 3 1 3 1 3 1 3 1 3 1 3
	<u> </u>
	
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E. Effective date, if other than the date of filing: (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 end occurrent's effective date on the Department of State's records.	05.0207 (3)(b) isted as the
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the ear (b) The 90th day after the record is filed.	lier of:
Dated January 20 2023	
Signature of a member or authorized representative of a member	
Michael J. DiClaudio	
Typed or printed name of signee	