L220002343/4

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
rtified Copies Certificates of Status
pecial Instructions to Filing Officer:
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D COMMETT

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Aprenta



May 24, 2022

MICHAEL DOBSON 4005 BRANDON HILL DRIVE TALLAHASSEE, FL 32309

SUBJECT: DDG MEDIA AND COMMUNICATIONS

Ref. Number: W22000068522

We have received your document for DDG MEDIA AND COMMUNICATIONS and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Our records indicate the original online filing request for the above named entity was not filed and was returned via email for corrections. Therefore, the enclosed document cannot be filed as the entity does not exist. Please check your email inbox for instructions to make the necessary corrections to complete the entity formation process.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 222A00011825

Claretha Golden Regulatory Specialist II

www.sunbiz.org

COVER LETTER

TO:	Registration Sec Division of Corp			
SUBJE	ест: <u>DD С</u>	Media and Name of Lim	Communication ited Liability Company	S, LLC
The end	closed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspor	ndence concerning this matter	to the following:	
		Mic	hael Dubson Name of Person	
			Firm/Company	
		4005 Br	andon Hill Dr Address	
		Tallah	ASSER, F/ 32 City/State and Zip Code	309
		Michael Dog E-mail address:	bsonand craig- (0) to be used for future annual report notifi	n cation)
r furt	ther information co	ncerning this matter, please ca	all:	
	Michael Name of	Dobson Person	at (850) 241- Area Code Daytime	J 896 Telephone Number
lose	ed is a check for the	: following amount:		
\$25	5.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

TO:

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: 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

1) i) 6 Media and Comm	Unications, LL	rds.)	
(A Florida Limito	npany as it now appears on our record Liability Company)	1.431)	
The Articles of Organization for this Limited Liability Compa	ny were filed on	2.7	_ and assigned
Torida document number <u>L22000234</u> 3	14		·
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited li	ability company here:		
Taray Media and Communic the new name must be distinguishable and contain the words "Limited Lie	cations, LLC		
he new name must be distinguishable and contain the words "Limited Lie	ability Company," the designation "LI	.C" or the abbre	viation "L.L.C."
Enter new principal offices address, if applicable:			_~
Principal office address MUST BE A STREET ADDRESS)			822
		:="	<u> </u>
			<u>-</u>
nter new mailing address, if applicable:		171 171 - 	<u> </u>
Mailing address MAY BE A POST OFFICE BOX)		<u> </u>	₩ C
		7) F. Tark	24
If amending the registered agent and/or registered offic	e address on our records, <u>ente</u>	r the name o	f the new register
ent and/or the new registered office address here:			
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street addr	ess	
		·lorida	
	City		Zip Code

Registered Agent's Signature, if changing Registered Agent:

reby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the visions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and pt the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is y filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability pany has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

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
AMBR	Goldsmith, Belinda	644 W. Brewnd St	
		Tallahusse, F132304	Remove
			□Change
MBR	Dunnis, Kurin	755 Lake Munroo Rd	
		Lake Menrae, F1 31747	Remove
			□Change
4BR	Dennis Karin Dennis	755 Lake Monrue Rd	ETAdd
	<i>9 (nm)</i>	Lake Minrue, F131747	□Remove
			Change
			□Add
			□Remove
			DChange
-			□Add
			□Remove
		·	[]Change
			DAdd
			Remove
			□Change

		
		
		
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effective date, i	if other than the date of filing: is listed, the date must be specific and cannot be prior to date of filing or more than 90 day a invested in this block does not recent the prior to date of filing or more than 90 day	(optional)
c. If the date	e inserted in this block does not meet the applicable statutory filing requirement	s after fitting.) Pursuant to 605.02 is, this date will not be listed
iment's effec	ctive date on the Department of State's records.	
ord specifies filed.	s a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier	of: (b) The 90th day after the
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(16-01-22	
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X	Many Carlos	

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