

# L23000258982

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

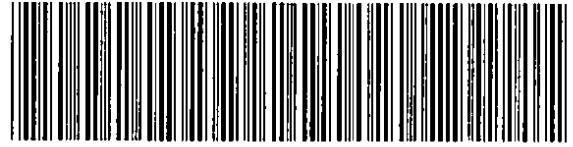
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



500411100525

06/26/23--01018--024 \*\*25.00

909 JUN 26 PM 2:55  
STATE  
FILE

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: NuLotus MEDIA Group (TD) 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:

ELEANOR G. HENRY  
Name of Person

NuLotus MEDIA Group (TD) LLC  
Firm/Company

1431 Simpson Rd Suite 2532  
Address

Kissimmee Florida 34744  
City/State and Zip Code

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

For further information concerning this matter, please call:

ELEANOR G. HENRY at (863) 326-8539  
Name of Person Area Code Daytime Telephone Number

2013 JUN 26 PM 2:55  
STATE

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 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

The Articles of Organization for this Limited Liability Company were filed on May 26, 2023 and assigned Florida document number L23000258982

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: (Principal office address MUST BE A STREET ADDRESS)**

\_\_\_\_\_  
\_\_\_\_\_

**Enter new mailing address, if applicable:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(Mailing address MAY BE A POST OFFICE BOX)

**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: \_\_\_\_\_

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 = Manager

AMBR = Authorized Member

Title                      Name                      Address                      Type of Action

MGR

ELEANOR HENRY

1301 CONGO CT  
KISSIMMEE, FL 34759

Add

AMBR · JERVIS E. TOMLINSON

1301 Congo Ct  
Kissimmee, FL 34759  Add

\_\_\_\_\_  Remove

\_\_\_\_\_  Change

\_\_\_\_\_  Remove

\_\_\_\_\_  Change

\_\_\_\_\_  Add

\_\_\_\_\_  Remove

\_\_\_\_\_  Change

\_\_\_\_\_  Add

\_\_\_\_\_  Remove

\_\_\_\_\_  Change

\_\_\_\_\_  Add

\_\_\_\_\_  Remove

\_\_\_\_\_  Change

\_\_\_\_\_  Add

\_\_\_\_\_  Remove

\_\_\_\_\_  Change

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

\_\_\_\_\_  
\_\_\_\_\_

