

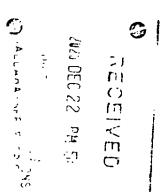
	(Requestor's Name)	
	(Address)	
	(Address)	
	(City/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL MAIL
	(Business Entity Name	<del>(</del> )
	(Document Number)	
Certified Copies	_ Certificates	of Status
	_	
Special Instructions to	Filing Officer:	

Office Use Only



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## **COVER LETTER**

Division of Cor			
SUBJECT:	Name of Lim	OF MEDIA LIN  ited Liability Company	£, L-L-C
	,		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
		Name of Person	
		Firm/Company	
	445	5 BNMEACLOWS F	2d, Suiti102
		k SONV. 1/z , FL 32 City/State and Zip Code	
		live a amail. con	ification)
For further information c	oncerning this matter, please ea	all;	
ACITON Name o	Bing Person	at (904) 314. Area Code Daytin	-3792 ne Telephone Number
Enclosed is a check for the	ne following amount:		
12 S25.00 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 Address Registration 9 Division of C P.O. Box 632	Section Corporations 17	Street Address: Registration So Division of Co The Centre of	rporations Fallahassee
Tallahassee, l	FL 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

VIBE MODA	LIVE, L	10			
(Name of the Limited (A	Liability Company Florida Limited Li	y <mark>as it now appears on o</mark> ability Company)	our records.)	<del></del>	
The Articles of Organization for this Limited Liab		vere filed on	<del></del>	and assigned	
Florida document number	·				
This amendment is submitted to amend the follow	ing:				
A. If amending name, <u>enter the new name of th</u>	ie limited liabil	ty company here:			
The new name must be distinguishable and contain the word	ls "Limited Liabilit	y Company," the design	ution "LLC" or the abl	previation "L.L.C."	
Enter new principal offices address, if applicable Enter new principal office address MUST BE A STREET A		44 55 R JACKSON	AYMEA dou ille, FL 3	1 Rd Surt 2217	<u>-</u> ゼルフ 
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u> </u>				
B. If amending the registered agent and/or regi agent and/or the new registered office address b		ldress on our record	ds, <u>enter the nam</u>	e of the new regi	stered
Name of New Registered Agent:	Aar	on Bing		<u></u>	
New Registered Office Address:	445	ON BING 5 BAYMEN Enter Florida st	Actow Rd	Suite 10	<u>}_</u>
	JAC	ksoNville	, Florida	32217	
		( ifi		730 ( DAP	

## 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.

N/A

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
AMBIZ	KEVIN Nickman	6349 REACH Blud	ØAdd
		JACKSONVILLE, F2 322	<u>/6</u> □Remove
			Change
AMBR		Chenghsin Chang	□Add
		Chenghsin CHANG 4455 BAYMEALOUS Rd S	int 102 RRemove
		Jacksonville, FL 32217	
	<del></del>		□Add
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	te, if other than the date of filing:(optional)
	ate is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020 date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed:
ument's e	ffective date on the Department of State's records.
	See a delicand offensive data has not an offensive since at 12/01 and an about a college of the 1994 days of our the
coru speci s filed.	fies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
	D., 22 1023
ed	DEC 22, 2023
	Signature of a member or authorized representative of a member

Filing Fee: \$25.00