## 

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone #	•)
	WAIT	MAIL
	<b>WA</b> II	IVIAIL
(Bu	siness Entity Name	)
(Do	cument Number)	
Certified Copies	_ Certificates o	f Status
Special Instructions to	Filing Officer:	
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an VIC	Office Use Only	



07/11/05--01028--004 \*\*25.00



## TRANSMITTAL LETTER

TO: Registration Sec Division of Cor			
SUBJECT: HE TOOK	MY STAPLER, LLC		
		mited Liability Company)	
The enclosed Articles of	Amendment and fee(s) are su	bmitted for filing.	
Please return all correspo	endence concerning this matte	r to the following:	
<u>)</u>	CYLER E. WILSON		
_	Q	Name of Person)	
HE TO	OK MY STAPLER, LLC		
	•	Firm/Company)	<b>b</b> :
3304 BISH	OP PARK DRIVE, SUITE 8		TALLAGE
WIN	ITER PARK, FLORIDA 327	(Address)	ASSEE.
		/State and Zip Code)	73
For further information o	concerning this matter, please of	call:	1:15 STATE LORIDA
KYLER E. WIL	SON (Name of Person)	at (407) 489-75	595 ne Telephone Number)
	(A Marie of Lateral)	tute our a Dayan	m sumpanie inagenaj
Enclosed is a check for the	following amount:		
Ø \$25.90 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	<ul> <li>\$55.00 Filing Fee &amp; Certified Copy (additional copy is enclosed)</li> </ul>	(1 \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

111	(Present Name) (A Florida Limited Liability Company)	<u></u>		-	
FIRST:	The Articles of Organization were filed on 05/13/04 and ass document number L04000036564	igned			
SECOND:	The following amendment(s) to the Articles of Organization was/were addiability company:	pted by	the lin	nited	
ARTICLE-1	Change of company name.				
	ne is HE TOOK MY STAPLER, LLC. ture name is ROXSTAR MEDIA, LLC	* distance.	SECRETARY OF STATE TALLAHASSEE, FLORIDA	05 JUL 11 PM 1:15	
Dated JUL	77 2005	<b>.</b>			
	Signature of a shamber or authorized representative of a member				
	Typed or printed name of signee		······································		

Filing Fee: \$25.00