

L04000087737

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

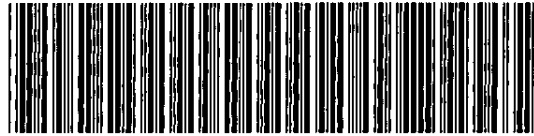
Special Instructions to Filing Officer:

A. LUNT

MAY 15 2008

EXAMINER

Office Use Only



900129022939

05/14/08--01013--008 **25.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2008 MAY 14 P 1:10

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TUNERZINE MEDIA 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:

DONNY MAK
(Name of Person)

TUNERZINE MEDIA LLC
(Firm/Company)

12700 BARTRAM PARK BLVD #2433
(Address)

JACKSONVILLE, FL 32258
(City/State and Zip Code)

For further information concerning this matter, please call:

DONNY MAK at 917 566-7036
(Name of Person) (Area Code & Daytime Telephone Number)

2008 MAY 14 P 1:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2001 Executive Center Circle
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

TUNERZINE MEDIA LLC
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 11/29/2004 and assigned Florida document number L04000087737.

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 end with 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)

12700 BARTRAM PARK BLVD
2433
JACKSONVILLE, FL 32258

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

12700 BARTRAM PARK BLVD
2433
JACKSONVILLE, FL 32258

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:

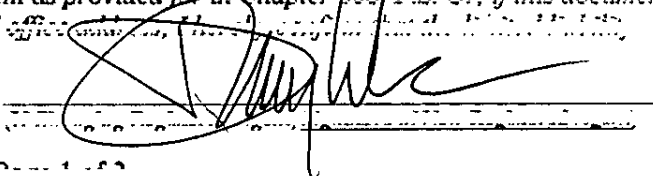
DONNY MAIK

New Registered Office Address:

12700 BARTRAM PARK BLVD # 2433
(Enter Florida street address)
JACKSONVILLE, Florida 32258
(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 608 F.S. Or, if this document is being filed to merely reflect a change in the registered office address, then I agree that the company has been notified in writing of this change.



FILED
2008 MAY 14 PM 1:10
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

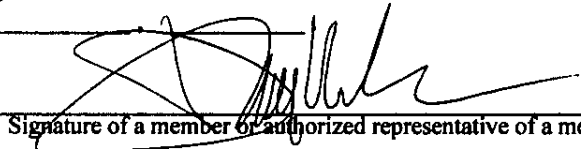
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	DONNY MAK	12700 BARTMAN PARK BLVD # 2433 JACKSONVILLE, FL 32258	<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

2008 MAY 14 PM 1:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

Dated 05/09/2008



Signature of a member or authorized representative of a member

DONNY MAK
Typed or printed name of signee