# L05000095807

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OR AUG 20 AM 10: QL SECRETARY OF STATE

D. BRUCE
AUG 2 0 2008

**EXAMINER** 

## **COVER LETTER**

TO: Registration Section Division of Corpor			,
SUBJECT:	(Name of Limit	dia Marketing - ted Liability Company)	International, LL
The enclosed Articles of Am	endment and fee(s) are subt	mitted for filing.	
Please return all corresponde	nce concerning this matter t	to the following:	
-		(Name of Person)  (Name of Person)  (Name of Person)  (Firm/Company)	
•		266 Iris (Address)  Jopher H (City/State and Zip Code)	Dr. J. SEGRE JAW. 334 45 AMASSI
For further information concerns (Name of Personal Section 2)	MeGann erson)	at (Sd) 630 C (Area Code & Daytime To	
. /	□\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)

### MAILING ADDRESS:

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

ic

### STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



### FLORIDA DEPARTMENT OF STATE Division of Corporations

July 25, 2008

MORNA MCGANN 266 IRIS DRIVE JUPITER, FL 33458

SUBJECT: MEDIA MARKETING INTL., LLC.

Ref. Number: L05000095807

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

You must insert the letters "MGRM" beside the name and address of each managing member and/or the letters "MGR" beside the name and address of each manager listed in the document.

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) 245-6984.

Deborah Bruce Regulatory Specialist II

Letter Number: 908A00043182

OB AUG 20 AM IO: 04

Division of Compositions DO POV 6297 Tollahaggas Florida 22214

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Media Mark	leting Intl., L	c.		
(Name of the Limited Liability (A Florida	y Company as it now appears on o Limited Liability Company)	ur records.)		
The Articles of Organization for this Limited Liability C	Company were filed on <u>9-2</u> 75807	2-05 and assigned		
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the lim	nited liability company here:			
The new name must be distinguishable and end with the wo "L.L.C."	rds "Limited Liability Company," th	e designation "LLC" or the abbreviation		
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDI	RESS)	AHASSE		
Enter new mailing address, if applicable:		AN IO: 04		
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>		
B. If amending the registered agent and/or regis registered agent and/or the new registered office add  Name of New Registered Agent:  New Registered Office Address:	lress here:	cords, enter the name of the new		
	(Emer Prortau street address)			
	(City)	, Florida (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, I hereby confirm that the limited liability company has been notified in writing of this change.

Af amendin	o the Manager	Inr Managing Members on	or ords, enter the title, name, and	address of each Manager
or Managu	ng Member bei	added or removed from c	our records:	
MGR = Ma MGRM = 1	anager Managing Mem	per .		
<u>Title</u>	Name		Address	Type of Action
MGR	Zic	en Hessea	266 Iris Drive	
N. John			Jupiter FL 33454	Remove
				<del></del>
			400	Add Remove
	1	,		
MGRY	n Mori	JA Mc Gann	266 Iris Drive	Add
· ·	<u> (</u> 2		Jupiter Pess	Kelliove Relieve
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<b></b>		<del></del>		Add Remove
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	•	<del></del>	· ,	Add
				Remove
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D. If amc	nding any other	information, enter change	s) here: (Attach additional sheets, if nece	essary.)
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_				AS O
-				AUG 2
_				
Dated	Max	· R, 2008		F STA
	'	Mossis	Skr	
			r authorized representative of a member	<del></del>
			r printed name of signee	
		·	Page 2 of 2	

Filing Fee: \$25.00