## L060000021702

•		
(Requ	iestor's Name)	
(Addr	ess)	
(Addr	ess)	
(City/s	State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
		,
(Busin	ness Entity Na	me)
(Docu	ment Number)	1
Certified Copies	Certificate	s of Status
Special Instructions to Fil	ing Officer:	
·		
		,
	•	
,		

Office Use Only



600126683846

06/18/08--01022--020 \*\*25.00

SECRETARY OF STATE
SECRETARY OF STATE
SIVISION OF CORPORATIONS
SIVISION OF CORPORATIONS

MIN - A SUM.

J. BRYAN

JUN 18 2008

**EXAMINER** 

## **COVER LETTER**

TO: Registration Section ' Division of Corporations
SUBJECT: Cerrato 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:
Please return all correspondence concerning this matter to the following:  Elizabeth Lema  (Name of Person)  ThinkFirst! Strategy  (Firm/Company)
POBOX 47565  (Address)  Tampa, FLorida 33646  (City/State and Zip Code)
For further information concerning this matter, please call:
ELizabeth Lema at 727, 512-4908 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{Certificate of Status}\$\$ \$\ \text{Certified Copy} \\ \text{(additional copy is enclosed)}\$\$ \$\ \text{Certified Copy} \\ \text{(additional copy is enclosed)}\$\$ \$= \text{Certified Copy}\$\$ \$= Cer

MAILING ADDRESS:

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

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



## FLORIDA DEPARTMENT OF STATE Division of Corporations

June 4, 2008

ELIZABETH LEMA THINKFIRST!STRATEGY, LLC PO BOX 47565 TAMPA, FL 33646

SUBJECT: CERRATO MEDIA LLC Ref. Number: L06000021702

We have received your document for CERRATO MEDIA LLC, however, upon receipt of your document no check was enclosed. Please return your document along with a **check** or **money order** made payable to the Department of State for \$25.00.

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) 245-6043.

Letter Number: 008A00034741

Joey Bryan Regulatory Specialist II OB JUN 17 PH 12: 45

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Cerrato Media,		LA 17
(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appears on our recordiability Company)	Is.) PROPOS
The Articles of Organization for this Limited Liability Company Florida document number	were filed on 2/28/8	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab  Think First! Strategy L  The new name must be distinguishable and end with the words "Limit"  "L.L.C."	1.0	ation "LLC" or the abbreviation
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 offregistered agent and/or the new registered office address here	Tampa, FL	1565 33646 enter the name of the new
Name of New Registered Agent:  New Registered Office Address:	(Enter Florida str , Flori	da
*\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	(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, 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 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 **Type of Action Title Name Address** Mario Cerrato MGR 7 Add Remove Add 🗂 Remove Add 🗂 Remove 🗂 Add Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00