L06000040389

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SECRETARY OF STATE
TAIL ANASSEE FI ORIDA

COVER LETTER

Division of Corp		•	
SUBJECT: ORLAN	DO.NET, LLC		
		ited Liability Company)	
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	Brian M. Rowland, Esq.	(Name of Person)	
		(
	Brian Rowland, P.A.	(Firm/Company)	
		(rirm/Company)	
	10752 Deerwood Park B	lvd. S., Waterview II, Suite 100	
		(Address)	
	Jacksonville, FL 32256		
		(City/State and Zip Code)	
For further information of	oncerning this matter, please c	all:	
To further mornation ec	meering this matter, preuse e	·	
Brian M. Rowland	at (_904_) 394-2929		
(Name o	f Person)	(Area Code & Daytime T	elephone Number)
Enclosed is a check for th	a fallouing amounts		
	_	Control Dill D. 4	Dece on Pillage For
\$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
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

08 SEP 25 AM IO: 25
SECRETARY OF STATE
TALLAHASSEE FLORIDA

ORLANDO.NET, 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 Liab	ility Company were filed on 4/18/2006	and assigned
Florida document number L06000040389		
This amendment is submitted to amend the follow	ing:	
A. If amending name, enter the new name of th	e limited liability company here:	
The new name must be distinguishable and end with the "L.L.C."	he words "Limited Liability Company," the de	signation "LLC" or the abbreviation
Enter new principal offices address, if applicab	le:	
(Principal office address MUST BE A STREET A	ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	<u> </u>	
B. If amending the registered agent and/or registered agent and/or the new registered offic		ds, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	(Enter Florida street address)	
	(City)	Florida(Zip Code)
	<i>ICHVI</i>	(ZID COUE)

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** <u>Name</u> **Address** MGR Royall Media, Inc. 1916 S. Ferncreek Ave. 7 Add Remove Orlando, FL 32806 ☐ Add Remove Add Remove ☐ Add Remove **∏** Add Remove **ॉ** Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated September 22 Signature of a member or authorized representative of a member Brian M. Rowland, Member Typed or printed name of signee

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Filing Fee: \$25.00