L070000033639

(Rei	questor's Name)	
(Add	dress)	
- (Add	dress)	
(City	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to I	Filing Officer.	

Office Use Only



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2020 July 28 FM 1: 54

O SIMMONS JAN 29 2020 CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 154222 8188264

AUTHORIZATION : Spelle Ble

COST LIMIT : \$\sqrt{2}\documen.00

ORDER DATE : January 28, 2020

ORDER TIME : 11:23 AM

ORDER NO. : 154222-010

CUSTOMER NO: 8188264

DOMESTIC AMENDMENT FILING

NAME: IMAHOUSE, LLC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT
RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Kadesha Roberson -- EXT# 62980

EXAMINER'S INITIALS:

COVER LETTER

Div	Division of Corporations			
SUBJECT:	Imahouse, L			
ooboner.		Name of Lim	ited Liability Company	
771				
i ne enclosed	Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspon	idence concerning this matter	to the following:	
		Erika Lucas		
			Name of Person	
		Mediapro US, Inc.		
			Firm/Company	<u>-</u>
		7004 1111 7411 74	,	
		7291 NW 74th Street		
			Address	
		Medley, Florida 33166		
			City/State and Zip Code	
		elucas@mediapro.tv		
		E-mail address: (to be used for future annual report not	ification)
For further in	formation co	ncerning this matter, please ca	all:	
Erika Lucas			305 357-6000	
	Name of	Person	at () Area Code Daytin	ne Telephone Number
		C.11		
		following amount:		
≅ \$ 25.00 F	iling 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)
	ling Address distration Se		Street Address: Registration Se	ction
	ision of Co		Division of Co	
	. Box 6327		The Centre of	

Tallahassee, FL 32314

TO:

Registration Section

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

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

Imahouse, LLC		
(<u>Name of the Limited Liab</u> (A Flori	ility Company as it now appears on our record da Limited Liability Company)	<u>s.</u>)
The Articles of Organization for this Limited Liability	Company were filed on 3/27/2007	and assigned
Florida document number L07000032639	<u></u> .	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lir	mited liability company here:	
Mediapro US Facilities, LLC		202 See
The new name must be distinguishable and contain the words "Li	mited Liability Company," the designation "LLC	
Enter new principal offices address, if applicable:		AN 2
(Principal office address MUST BE A STREET ADD	DRESS)	<u>}</u>
		(i) - 1
		17 (2) Q
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		· · · · · · · · · · · · · · · · · · ·
		,
3. If amending the registered agent and/or register gent and/or the new registered office address here.		the name of the new registe
Name of New Registered Agent:		
New Registered Office Address:		
New Registered Office Address:	Enter Florida street addres	s
New Registered Office Address:		s orida

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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□ Add
			□Remove
			Change
			□Add
			2026 J SEGRE
			
			E DReffleve
			□Add
			□Remove
			□Add
			□Remove
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(If an effect Note: If	te date, if other than the date of filing:	07 (3 as th
he record s ord is filed	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the	c
Dated	January 21 . 2020	
	Signature of a member or authorized representative of a member	
	Irantzu Diez Gamboa	
	Typed or printed name of signee	

Filing Fee: \$25.00