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EXAMINER



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SECRETARY OF STATE DIVISION OF CORPORATIONS

COVER LETTER

TO: Registration Section Division of Corporations							
SUBJECT: MADE COMMUNICATION, LLC							
(Name of Limited Liability Company)							
The enclosed Articles of A	mendment and fee(s) are sub	mitted for filing.					
Please return all correspon	dence concerning this matter	to the following:					
•							
	GREGORY FRANKEL						
		(Name of Person)					
	MADE COMMUNICATIO						
		(Firm/Company)					
175 SW 7TH STREET, STE 2009							
		(Address)					
	MIAMI, FL 33130						
		(City/State and Zip Code)					
For further information co	ncerning this matter, please c	all:					
	, , , , , , , , , , , , , , , , , , ,						
GREGORY FRANKEL (Name of Person) at (786) 220-2370 (Area Code & Daytime Telephone Number)		Palankana Numban					
(Name of	reison)	(Area Code & Daytime 1	elephone Number)				
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
2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MADE COMMUNICATION, LLC			
(<u>Name of the Limited Liab</u> (A Flori	ility Company as it now appears on our records.) da Limited Liability Company)		
The Articles of Organization for this Limited Liabilit	ry Company were filed on APRIL 13, 2007	_ and assigne	ed
Florida document number L07000039652	·		
This amendment is submitted to amend the following	3:		
A. If amending name, enter the new name of the	limited liability company here:		
	words "Limited Liability Company," the designation "LLC	or the abbro	eviation
"L.L.C."		08	₹s
Enter new principal offices address, if applicable:		S	SICE
(Principal office address MUST BE A STREET AL	ODRESS)	꾸	ZÃ OH OH
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Markey and the state of the sta		.;	黨份
Enter new mailing address, if applicable:	· · · · · · · · · · · · · · · · · · ·	<u></u>	
(Mailing address MAY BE A POST OFFICE BOX			2017
			
B. If amending the registered agent and/or registered agent and/or the new registered office a	gistered office address on our records, enter the	name of th	<u>ne new</u>
regional agent and or the new regions of the con-			
Name of New Registered Agent:		<u> </u>	
New Registered Office Address:			
	(Enter Florida street address)		
<u> </u>	, Florida		
	(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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	DANIEL DOMINGUEZ	6515 COLLINS AVE. #602 MIAMI BEACH, FL 33141	Add Remove
MGRM_	PAID ATTENTION, INC	175 SW 7TH STREET, STE. 2009 MIAMI, FL 33130	Add Remove
			Add Remove
			Add Remove
			Add Remove
		· · · · · · · · · · · · · · · · · · ·	Add Remove
D. If amen	ding any other information, enter cl	nange(s) here: (Attach additional sheets, if necessary.)
			_ _
_			<u> </u>
Dated SEP1	EMBER 23 , 20	008	
	Signature of a me	mber or authorized representative of a member	
	GREGORY FRANK		
	, T	vped or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00