10800006445

(Requestor's Name)					
. (Address)					
(Address)					
(City/State/Zip/Phone #)					
<u> </u>					
PICK-UP WAIT MAIL					
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(Document Number)					
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EXAMINER

COVER LETTER

TO: Registration Solution of Col					
, SURLINGE FUTURI	E MOBILE MEDIA, LLO	<u>:</u>			
SUBJECT: FUTURI		ited Liability Company)			
The enclosed Articles of	*Amendment and fee(s; are sul	omitted for filing.			
Please return all correspondent	ondence concerning this matter	to the following:			
	ESF	PERANZA RAVELO			
		(Name of Person)			
	FUTL	JRE MOBILE MEDIA, LLC.			
		(Firm/Company)			
		11855 SW 43 ST			
		(Address)			
	N	MAMI FL FL 33175 US			
		(City/State and Zip Code)		7s 28	
For further information c	concerning this matter, please c	all:		2000 FEB 2 SECRETA	
FERNANDO ROB	LES	at (305) 978-0444		25 ARY SSE	FAT
(Name	of Person)	(Area Code & Daytime	Telephone Number)	AM ID: 5 OF STATE E. FLORIE	
Enclosed is a check for t	he following amount:		1	9m - 1	
\$25.00 Filling Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified (of Status &	i)

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

•	10	
ARTIC	LES OF ORGANIZATION	TALE 2200
•	OF	
•	Or	
		DAR ASS
FI	JTURE MOBILE MEDIA, LLC.	ASSET ASSET
(Name of the Limited L	iability Company as it now appears on our lorida Limited Liability Company)	r records.)
(A F	lorida Limited Liability Company)	
		ES 5
The Articles of Organization for this Limited Liab	pility Company were filed on 01-18-08	and assigned
- L 0000006445		,
Florida document number <u>L0800006445</u>	•	
This amendment is submitted to amend the follow	vina:	
This different is submitted to different the follow	·····g.	
A. If amending name, enter the new name of t	he limited liability company here:	
The new name must be distinguishable and end with	the words "Limited Liability Company," the	designation "LLC" or the abbreviation
L.L.C."		
D 16 1' 1 1 1		
B. If amending the registered agent and/or		ords, enter the name of the new
registered agent and/or the new registered offic	ce address nere:	
Name of New Registered Agent:		
· · · · · · · · · · · · · · · · · · ·		
New Registered Office Address:		
	(Enter Flor	rida street address)
	•	•
		_, 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 = Ma MGRM = N	nager Ianaging Member		
<u>litle</u> .	<u>Name</u>	Address	Type of Action
MGR_	FERNANDO ROBLES	P.O. BOX 833066 MIAM! FL 33283 US	☐ Add
			Add Remove. ARETARY Add TA
			Remove OR O
			Add Remove
	ling any other information, enter ch	ange(s) here: (Attach additional sheets, if nece	Add Remove
	DERAL EIN NUMBER IS: 26-		
_			
Dated Febr	F	nu flis	
	Fo	ANNY FOR OF a member	

Page 2 of 2

Filing Fee: \$25.00