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D SCOTT JUN 2 1 2017

COVER LETTER

TO: Registration Sec Division of Corp				
SURJECT: CVRCR	MEDIA LIC			
50000 C C 77700 C	MEDIA, LLC Name of Limi	ted 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:		
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	lames A Ro	مبدا		
	JHIVES A. E.	Name of Person		
		Firm/Company		
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	980) SOURA	Cove POINTE APT	10!	
	FORT MYERS	FL 33908 City/State and Zip Code Brown @Gm411.C		
	1	City/State and Zip Code	•	
	<u>JAMES HRWOW.</u> E-mail address. (to be used for future annual report notif	ication)	
For further information co	oncerning this matter, please co	ıll:		
JAMES	A. BROWN	at (<u>239</u>) <u>287 -</u>	-3430	•
Name of	rerson	Area Code Dayume	r relephone Number	
		all: at (<u>239</u>) <u>28 7 -</u> Area Code Daytime	.*	5 -
□ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy radditional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Statu Certified Copy	-

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

CYRERMEDIA LLC		
CYRERME DIA LLC (Name of the Limited Liability Compar (A Florida Limited L	y as it now appears on our records.) lability Company)	
The Articles of Organization for this Limited Liability Company	_	and assigned
Florida document number <u>Lø8øøøø9939</u> .		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
TNTECHRITY LLC The new name must be distinguishable and contain the words "Limited Liabili		
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:		<u> </u>
(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 of		er the name of the nev
registered agent and/or the new registered office address here	;i	
N CN D C A		
Name of New Registered Agent:		
New Registered Office Address:		·.·
	Enter Florida 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 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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager

AMBR = A	authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			Remove
			Change
			Add
			Remove
			Change
			□ Add
			☐ Remove
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			Change
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			Change

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Filing Fee: \$25.00