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TO:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062 Phone : (323)962-8600 : (323)389-0502 Fax Number

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

Email Address:\_\_\_\_

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN KARBEL MULTIMEDIA LLC

Certificate of Status	()
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Page Count	05
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## **COVER LETTER**

Division of Co				
	MULTIMEDIA LLC			
SUBJECT:	Name of Limited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	matted for filing.		
Please return all corresp	ondence concerning this matter	to the following:		
	Mike Town			
		Name of Person		
	Legalzoom.com. Inc.			
		Firm/Company		
	9900 Spectrum Dr			
		Address		
	Austin, TX 78717			
	iveykayla@gmail.com	City/State and Zip Code		
		to be used for future annual report notif	ication)	
For further information of	concerning this matter, please of	all:		
Mike Town		800 773-0888		
Name (	of Person	af () Area Code Daytime	: Telephone Number	
finctosed is a check for t	he following amount.			
□ \$25,00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55 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, Ft. 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Lighility C	opposas it now appears an our records I	
(A Florida Lir	ompany as it now appears on our records.) mted Liabilits Company)	
The Articles of Organization for this Limited Liability Com Florida document number 1.08000099668	pany were filed on 10/23/2008	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	Hiability company here:	
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		<del></del>
Principal office address MUST BE A STREET ADDRES	55)	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BON)		
		,
		,
3. If amending the registered agent and/or register		nter the name of the p
egistered agent and/or the new registered office address	s here:	1
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street uddress	
	, Florid	а
	(in	Zee 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, enter the title, name, and address of each person-being added or removed from our records:

MGR = Manager AMBR = Authorized Member

Page: 5 of 6

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	MGR KRBEL IVEY TRUST, DATED AUGUST 31, 2019		□ Add
			☐ Remove
		4584 Kellybrook Dr. Concord, North Carolina 28025	🔁 Change
			☐ Remove
			☐ Change
			□ Remove
			☐ Change
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			☐ Remove
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	<ul> <li>Page: 6 of 6</li> </ul>	2024-12-26 08:07:18 PST	LegalZoom.com, Inc.	From Sylvia
D. If	f amending any other informa	ntion, enter change(s) here: [Attack	additional sheets, if necessary.)	
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E. E	ffective date, if other than the	date of filing:	(optional) ang or more than 90 days after filing.) Pursuant to 60:	5 0 '07 / 3 //5)
<u>.</u>	Sote: If the date inserted in this bl	lock does not meet the applicable statuto	ory filing requirements, this date will not be list	ed as the
d	ocument's effective date on the D	epartment of State's records.		
15 44-	d-l	d effective data but ast an affect	etive time at 17.01 a m an the garli	or of
	The 90th day after the rec		ctive time, at 12:01 a.m. on the earli	ei oi.
	12/26	2024		
I)	ated	·		
	/S/ Karsten Ivey			
		Signature of a member or authorized repres		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00