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TILTU 2008 DEC -I AM 7: 31 SECHETARY OF STATE

C. LEWIS

DEC 0 22008

EXAMINER

COVER LETTER

			·		
TO:		ation Sec 1 of Corp			
SUBJ	ECT:	Ju.	Stice For All (Name of Limi	Magazine LL ited Liability Company)	<u>-C</u>
The er	nclosed Art	icles of A	mendment and fee(s) are sub-	mitted for filing.	
Please	return all	correspon	dence concerning this matter	to the following:	
			Stace	y Burn worth (Name of Person)	
			Profes	Sional Paperwood (Firm/Company)	- KS
			211 N	1°Leod St. (Address)	
			Merr	TSland, FL (City/State and Zip Code)	32953
For fu	rther infor	nation co	ncerning this matter, please ca	all:	
	Sto	(Name of	Person)	at (321) 459-2 (Area Code & Daytime T	2260
Enclo	sed is a che	eck for the	following amount:		
¤ \$2	5.00 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

State of the state

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2000 DEC - 1 AM 7:38

Justice F	or ALL Mago	SECRETARY OF STATE CZINCTALLAHABSEE, FLORIDA n our records.)	
(<u>Name of the Limited Liat</u> (A Flor	oility Company as it now appears of ida Limited Liability Company)	n our records.)	
The Articles of Organization for this Limited Liabili		0.28-08 and assigned	
This amendment is submitted to amend the followin	g:		
A. If amending name, enter the new name of the	limited liability company here:		
Central Florida	Focus Magaz	cine LLC	
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Company	"the designation "LLC" or the abbreviation	
Enter new principal offices address, if applicable	<u> </u>		
(Principal office address MUST BE A STREET Al	DDRESS)		
	<u></u>		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX	2		
B. If amending the registered agent and/or registered agent and/or the new registered office		records, enter the name of the new	
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 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 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:

MGRM = Managing Member	
<u>Title</u> <u>Name</u> <u>Address</u>	Type of Action
	Add Remove
	- n
	D
	Pamaua
	Add Remove
	-
D. If amending any other information, enter change(s) here: (Attach additional sheets, if no	ecessary.)
	Ziga Dec -1
Dated Nov. 25, 2008. Staces Burnuott	in the second
Signature of a member or authorized representative of a member Stacey Burnworth Typed or printed name of signee	EE.FLORIE

Page 2 of 2

Filing Fee: \$25.00