L08000108903

(Requ	estor's Name)			
(Addre	ess)			
(Addre	ess)			
(City/S	state/Zip/Phon	ne #)		
PICK-UP	. WAIT	MAIL		
(Business Entity Name)				
(Docu	ment Number)		
Certified Copies	Certificate	s of Status		
Special Instructions to Filing Officer:				
L. SELLERS				
DEC 312008				
EXAMINER				
	- 			

Office Use Only



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12/12/08--01018--021 **55.00

08 DEC 30 AM 8: 41

. , . COVER LETTER

Division of Co	rporations		
SUBJECT: YourLo	ocalAdLink, LLC		_
		ited Liability Company)	
	Amendment and fee(s) are sub ondence concerning this matter	_	
	Gary C Larson		
		(Name of Person)	
	Manasota Marketing, LL	C (Firm/Company)	
	P.O. Box 17781	(,, ,	
		(Address)	
	Sarasota, FL 34276	(C) (S) 17 0 18	1
		(City/State and Zip Code)	
For further information of	concerning this matter, please o	all:	
Gary C Larson		at (941) 545-4077	
(Name	of Person)	(Area Code & Daytime T	elephone Number)
Enclosed is a check for the	he 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		STOFFT/CAHDIFD	ADDDESS.

TO:

Registration Section

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



December 15, 2008

GARY C. LARSON P.O. BOX 17781 SARASOTA, FL 34276

SUBJECT: YOURLOCALADLINK, LLC

Ref. Number: L08000108903

We have received your document for YOURLOCALADLINK, LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Letter Number: 908A00060366

Leslie Sellers Regulatory Specialist II

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

ARTICLES OF AMENDMENT TO

ARTICLES OF ORGANIZATIONS DEC 30 AM 8: 41 **OF**

SEURI, A JE U. STATE TALLAHASSLE FLORIDA

YourLocalAdLink, LLC

company has been notified in writing of this change.

(Name of the Limited Liability Compar (A Florida Limited L	y as it now appears on our records.) iability Company)
The Articles of Organization for this Limited Liability Company	were filed on November 24,2008 and assigned
Florida document number L08000108903	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	<u>llity company here</u> :
Manasota Marketing, LLC	
The new name must be distinguishable and end with the words "Limit "L.L.C."	ed Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	5305 Avenida Del Mare
(Principal office address MUST BE A STREET ADDRESS)	Sarasota, FL 34242
	<u>usa</u>
Enter new mailing address, if applicable:	Post Office Box 17781
(Mailing address MAY BE A POST OFFICE BOX)	Sarasota, FL 34276 USA
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here	
Name of New Registered Agent: CM.	y C. Larson
New Registered Office Address: 451	1 C. Larson 7 S. LOLKWOOD Ridge Rd. (Enter Florida street address)
San	(City) , Florida 3423/ (Zip Code)
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent;	
I hereby accept the appointment as registered agent and agre the provisions of all statutes relative to the proper and compl accept the obligations of my position as registered agent as p	ete performance of my duties, and I am familiar with and

Page 1 of 2

(If Changing Registered Agent, Signature of New Registered Agent)

being filed to merely reflect a change in the registered office Address, I hereby confirm that the limited liability

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> **Name** <u>Address</u> **Type of Action** MGR Gary C. Larson

MGR Jeffrey L. Silver 4517 S. LOCK WOOD Ridge Rd Add SACASOK, FL 34231 Remove 5305 Avanida Del Mare MAdd Sacasota, Fr. 34242 Remove 🗂 Add 🛅 Remove ☐ Add ☐ Add Remove **∫** ∏ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated 12-22-_. 2008 . Signature of a member or authorized representative of a member Gary C. Larson
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00