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(Requestor's Name)					
(Address)					
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(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
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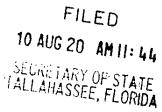
COVER LETTER

TO: Regist Divisi	ration Section on of Corporations	
SUBJECT: _	Blacksheep Digital Gro	oup. LLC.
SUBJECT	Name of Limited Liability C	
The enclosed A	articles of Amendment and fee(s) are submitted for filing	ng.
Please return al	l correspondence concerning this matter to the following	ng:
	Andrew C	
	Blacksheep Digit	
	Firm/Cor	npany
	12717 W. Sunri	se Blvd. #279
	Addre	
	Sunrise, Fl City/State and	33323 I Zip Code
		•
	E-mail address: (to be used for fut	ture annual report notification)
For further info	ormation concerning this matter, please call:	
	Andrew Claridge at (_9	54) 682-0759
***************************************	Name of Person	Area Code & Daytime Telephone Number
Enclosed is a c	heck for the following amount:	
\$25.00 Filis	_	filing Fee & \$\int\\$60.00 Filing Fee,
\$25.00 T III	Certificate of Status Certific	ed Copy conal copy is enclosed) 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



<u>cksheep Dig</u>	<u>ital Group, Ll</u>	_C.	
A Florida Limited	iny as it now appea Liability Company)	irs on our records.)	
Liability Compan	y were filed on	11/24/2008	and assigned
llowing:			
of the limited lia	bility company he	ere:	
			
		pany," the designation "I	LC" or the abbreviati
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
			
	N/A		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
-,			
office address he	<u>re</u> :	<u> </u>	,
N/A			
<u>N/A</u>	F	nter Florida street ada	lross .
	City	, Florida	Zip Code
. D1-4 1 4	•		<i>Y</i> .
Registered Agent			
	Liability Company 18922 Illowing: 1	Liability Company were filed on	Illowing: of the limited liability company here: N/A with the words "Limited Liability Company," the designation "Licable: N/A ETADDRESS) N/A N/A Enter Florida street add , Florida

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

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:

MGR = Manager

MGRM = Managing Member <u>Title</u> Type of Action <u>Address</u> <u>Name</u> 616 Navarre Ave Coral Gables, FL. 33134 **MGRM** Michael C. Hamel ☐ Add Remove ☐ Add Remove ☐ Add Remove Add Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) August 17 Signature of a member of authorized representative of a member Andrew Claridge
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00