L0900015197

(Red	questor's Name)			
(Add	dress)			
(Add	dress)			
(City/State/Zip/Phone #)				
PICK-UP	WAIT	MAIL		
(Bus	siness Entity Na	me)		
(Do	cument Number)		
Certified Copies	_ Certificate	s of Status		

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L. SELLERS

OCT -8 2010

EXAMINER

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SEGRETARY OF STATE.

COVER LETTER

TO: Registration Section - Division of Corporations					
SUBJE	CT:		BRUADCAST LLC ited Liability Company		
		· · · · · · · · · · · · · · · · · · ·	and Blacking Company		
The end	losed Articles of	Amendment and fee(s) are sul	bmitted for filing.		
Please r	eturn all correspo	ondence concerning this matter	r to the following:		
		MART	IN PETERA Name of Person		
		_			
		AVIATI	Firm/Company		
		1770	(POTTSKINDAF IT		
			SPOTTS WOODE CT Address		
		PORT ON	ANGE, FL, 32128 City/State and Zip Code		
		PEIERA &	TROP-JET. COM to be used for future annual report notification)		
For furt	her information o	concerning this matter, please of			
/	YARTIN	PETERA	at (<u>386) 679 - 880 Y</u> Area Code & Daytime Telephone Number		
	Name o	of Person	Area Code & Daytime Telephone Number		
Enclose	d is a check for t	he following amount:			
\$25.	00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & S60.00 Filing Fee, Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)		
	Registi Divisio P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 assee, 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

(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)						
The Articles of Organization for this Limited Liability Company were filed on and assigned						
Florida document number <u>L09000015697</u>						
This amendment is submitted to amend the following:						
A. If amending name, enter the new name of the limited liabil	lity company here:					
The new name must be distinguishable and end with the words "Limite "L.L.C."	ed Liability Company," the designation "LLC" or the abbreviation					
Enter new principal offices address, if applicable:	1738 SPOTTSKOODE CT					
(Principal office address MUST BE A STREET ADDRESS)	1738 SPOTTSKOODE CT PONT ONANGE, FL 32128					
	USA					
Enter new mailing address, if applicable:						
(Mailing address MAY BE A POST OFFICE BOX)						
B. If amending the registered agent and/or registered office address here						
	V PETERA ST					
New Registered Office Address: 1738	SPOTTSWOODE CT					
_	Enter Florida street address					
PORT	PAANUE, Florida 32/20					
New Registered Agent's Signature, if changing Registered Agent:	City Rap City					
I hereby accept the appointment as registered agent and agree the provisions of all statutes relative to the proper and comple accept the obligations of my position as registered agent as pro- being filed to merely reflect a change in the registered office of company has been notified in writing of this change.	ete performance of my duties, and I am familiar with and rovided for in Chapter 608, F.S. Or, if this document is					

If Changing Registered Agent, Signature of New Registered Agen

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>	<u>Name</u>	Address	Type of Action
MGR	MARIANA PETERA	1718 SPUTTS WOODE CT PURT ORANGE, FL 32/18	Add Remove
·			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amen	ding any other information, enter change	e(s) here: (Attach additional sheets, if necessary.)	_
_			
_			-
Dated	Signature of Kember	or authorized representative of a member	
	MANTI	w PETERA or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00