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(R	equestor's Name)		
(Ad	ddress)		
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PICK-UP	WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	Certificates	of Status	
Special Instructions to Filing Officer:			
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HOT THE CONTROL OF FILING SUFFICIENCY OF FILING

DEPARTMENT OF STATE
DIVISION OF CORPORATION
TO THE CORPORATION
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B. KOHRDEC **- 9** 2009

EXAMINER

SECRETARY OF STATE
OFFISION OF CORPORATIONS

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LAZARUS

CORPORATE FILING SERVICE

3320 SW 87TH AVENUE

MIAMI, FL 33165 (305) 552-5973

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CORPORATION NAME(S) & DOCUMI	ENT NUMBER(S), (i	if known):	1: 200
1. Migmi TV Ch (Corporation Name)	annel L (Document #)	LC:	5 0'
2. (Corporation Name)	(Document #)		
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Walk in Pick up time 2 Mail out Will wait	Photocopy	Certified Copy Certificate of Statu	as.
NEW FILINGS Profit Not for Profit Limited Liability Domestication Other	AMENDMENTS Amendment Resignation of Change of Regi Dissolution/Wi Merger		
OTHER FILINGS	REGISTRATION	QUALIFICATION	
Annual Report Fictitious Name	Foreign Limited Partner Reinstatement Trademark Other	rship	
		Examiner's Initials	

CR2E031(7/97)

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MIAMI TV CHANNEL LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)

The Articles of Organiza	tion for this Limited Lia	bility Company were filed on _	03-05-09	and assigned
Florida document numbe				
			•	
This amendment is subm	nitted to amend the follo	wing:		
A. If amending name,	enter the new name of	the limited liability company	here:	
The new name must be dis	stinguishable and end with	the words "Limited Liability Con	mpany," the designation "	LLC" or the abbreviation
Enter new principal of	fices address, if applica	ble:		
(Principal office addres	s <u>MUST BE A STREE</u> T	TADDRESS)		
Enter new mailing add	ress, if applicable:			
(Mailing address MAY		3 <i>0X</i>)		
	,	 		
B. If amending the registered agent and/or		r registered office address o ice address here:	n our records, enter	the name of the new
Name of New	Registered Agent:			
New Registere	d Office Address:			
			Enter Florida street add	dress
		, Florida		
		City		Zip Code
New Degistered Agent's	Signature if changing D	anistawal Aganti		

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 Changing Registered Agent, Signature of New Registered Agent

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			
MEMBE	ENRIQUE BENZONI	5600 COLLINS AVE #PH15P MIAMLBEACH-FL 33140	Add Remove			
MEMBE	MAXIMILIANO MIRSA	5600 COLLINS AVE #PH15P MIAMLBEACH-FL 33140	Add Remove			
	,		. Add Remove			
			Add Remove			
			Add Remove			
			Add Remove			
D. If amend	ling any other information, enter	change(s) here: (Attach additional sheets, if necessary.)				
			_			
			_			
Dated	12-1	2009. Willip				
	Signature of a	member or authorized representative of a member				
HUMBERTO IGLESIAS Typed or printed name of signee						