

LO9000034773

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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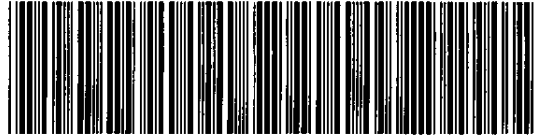
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**L. SELLERS**

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**EXAMINER**

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TALLAHASSEE FLORIDA

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** World Wide Multi Media LLC  
(Name of Limited Liability Company)

The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Louigi Serrano  
(Contact Person)

World Wide Multi Media  
(Firm/Company)

1420 Celebration Blvd Suite 200  
(Address)

Celebration FL 34747  
(City/State and Zip Code)

For further information concerning this matter, please call:

Louigi Serrano at ( 407 ) 221-6066  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

☒ \$25 Filing Fee

☐ \$55 Filing Fee &  
Certified Copy

**STREET/COURIER ADDRESS:**

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

**MAILING ADDRESS:**

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 17, 2009

LOUIYI SERRANO  
1420 CELEBRATION BLVD., STE. 200  
CELEBRATION, FL 34747

SUBJECT: WORLDWIDE MULTIMEDIA L.L.C.  
Ref. Number: L09000034773

We have received your document for WORLDWIDE MULTIMEDIA L.L.C. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

No form was attached to the coversheet for filing.

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.

Leslie Sellers  
Regulatory Specialist II

Letter Number: 809A00035854

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

World Wide Multimedia L.L.C  
(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 4/10/2009 and assigned  
Florida document number LO9000034773.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

1420 Celebration Blvd Suite 200  
Celebration, FL 34747

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1420 Celebration Blvd Suite 200  
Celebration FL 34747

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

New Registered Office Address:

1420 Celebration Blvd Suite 200  
Enter Florida street address  
Celebration, Florida  
City

**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 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

Title	Name	Address	Type of Action
MGRM	Gabriel A Zeballos	1825 Westpoint Cir Orlando FL 32835	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated \_\_\_\_\_, \_\_\_\_\_

\_\_\_\_\_  
Signature of a member or authorized representative of a member  
\_\_\_\_\_  
Typed or printed name of signee

Louigi Serrano

FILED  
09 DEC -9 PM 8:18  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA