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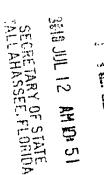
(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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T. CLINE
JUL 1 3 2010

EXAMINER

## **COVER LETTER**

Division of Co	rporations				
SUBJECT:	Amending name	from Energy by Elem	ents		
	Name of Lin	nited Liability Company			
			·		
The enclosed Articles of	Amendment and fee(s) are su	bmitted for filing.	ı		
Please return all correspondent	ondence concerning this matte	er to the following:			
		Jason Harvey			
		Name of Person			
	Met	hod Media Services, LLC	<u>;</u>	•	
		Firm/Company			
	133	359 daniels landing circle			
		Address			
				30 5	
	<u></u>	vinter garden, fl 34787			····
		City/State and Zip Code			e September
	jas	sonjharvey@gmail.com (to be used for future annual report r		TRIB JUL 12 SECRETARY	Campa K.
		•	ionneution)	مهداسير	
For further information of	oncerning this matter, please	call:		AN PP OF STA	A STATE OF THE STA
Ja	ison Harvey	at ( 407)	495 7169	ATE DATE	
	f Person	Area Code & Day	ytime Telephone 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 enclo	\$60.00 Fili Certificationsed) Certified	te of Status &	
<del>-</del> ,		-		al.copy.is enclosed).	

MAILING ADDRESS:

TO:

**Registration Section** 

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

Energy by	/ Elements			
( <u>Name of the Limited Liability Comp</u> (A Florida Limited	any as it now appear Liability Company)	rs on our records.)		
The Articles of Organization for this Limited Liability Compan	y were filed on	5/8/09	and assigned	
Florida document numberL0900045442				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited lia	bility company her	<u>'e</u> :		
Method Media	Services, LLC			
The new name must be distinguishable and end with the words "Lin" L.L.C."	nited Liability Compa	ny," the designation	ALII SEG	viation
Enter new principal offices address, if applicable:			AH JE	EUTSIASTA
(Principal office address MUST BE A STREET ADDRESS)			ARY SSE	7
•			MO 200	<u> </u>
Patricipal de la constitución de		,	STATE STATE	f
Enter new mailing address, if applicable:			<u> </u>	
(Mailing address MAY BE A POST OFFICE BOX)	- <u> </u>	···		
B. If amending the registered agent and/or registered or registered of the new registered office address he		our records, <u>ente</u>	er the name of the	new
Name of New Registered Agent:			~	
New Registered Office Address:	Fn	ter Florida street d		
	<i>511</i>	- ·		
	City	, Florida	Zip Code	

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 = Ma MGRM = N	nager Aanaging Member		;	
<u>Title</u>	<u>Name</u>	Address	;	Type of Action
				Add Remove
				Add Remove
				Add Remove
				S Add
				ASSECTAdd AM
				Add
D. If amen	ding any other information,	enter change(s) here: (Attach additional s	heets, if necessa	 nry.)
<del></del>			;	
·				
_			<del> </del>	
Dated	July 8	, 2010	ļ.	
	Signature	of a member or authorized representative of a	member	

Page 2 of 2

Filing Fee: \$25.00