L09000047642

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(Address)			
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(Document Number)			
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Special Instructions to Filing Officer:			
A. LUNT			
MAY - 6 2010			
EXAMINER			

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SECRETARY OF STATE TALLBAHASSEE, FEORIDA

FILED

COVER LETTER

TO: Registration Se						
SUBJECT:	TNB PU	BLISHING,LLC				
		ted Liability Company				
	Amendment and fee(s) are sub ondence concerning this matter	_				
		STEVEN COOKE				
		Name of Person				
		COOKE OBEATIVE				
	COOKE CREATIVE Firm/Company					
	240	PRESIDENT STREET		百四	2010 MAY	
	Address					
		DUNEDIN/FL 34698		H ₂	H -	-
		City/State and Zip Code	,	-85-X	£.	Ш
	stev	e@cookecreative.com			P	Ö
	E-mail address: (to be used for future annual report	notification)	STATE LORID	PM 2: 24	
For further information c	oncerning this matter, please o	all:		AOI 31	£	
STE	EVEN COOKE	at (727)	736-4616			
Name of Person			ytime Telephone Nur	mber	_	
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	Ocerti osed) Certi	Filing Fificate of ified Copitional co	Status o	
Registr Divisio	ING ADDRESS: ration Section on of Corporations ox 6327	STREET/CO Registration Se Division of Co Clifton Buildir	orporations	S:		

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	IB PUBLISHING, LLC		<u> </u>
(<u>Name of the Limited Li</u> (A Fl	ability Company as it now appea orida Limited Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Liab Florida document number	ility Company were filed on		and assigned
This amendment is submitted to amend the follow	ing:		
A. If amending name, enter the new name of the	e limited liability company he	<u>re</u> :	
CC	OKE CREATIVE, LLC		
The new name must be distinguishable and end with t "L.L.C."	he words "Limited Liability Comp	any," the designation "I	LLC" or the abbreviation
Enter new principal offices address, if applicab	le:		
(Principal office address MUST BE A STREET .	ADDRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BO	DX)		
B. If amending the registered agent and/or registered agent and/or the new registered offic		our records, <u>enter t</u>	he name of the new
Name of New Registered Agent:		de de Maria de la companione de la compa	,
New Registered Office Address:			
	Enter Florida street address		
		, Florida	
	City		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 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 = M MGRM =	anager Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Domesus
	······································		
			Add Remove
			Add Remove
			ASH []Add Remove
			Add Remove
D. If amen	nding any other information,	enter change(s) here: (Attach additional sheets	, if necessary.)
Dated	APRIL 20		
	Signatur	e of a member or authorized representative of a mem	ber
	~-5-14-151	STEVEN COOKE	
		Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00