0900071180

(Requ	estor's Name)	
(Addre	ess)	,
(Addre	ess)	
(City/S	State/Zip/Phone i	#)
PICK-UP	☐ WAIT	MAIL
(Busin	ess Entity Name	e)
(Docu	ment Number)	<u>-</u>
Certified Copies	Certificates o	of Status
Special Instructions to Fili	ng Officer:	

Office Use Only



500163931965

12/28/03--01010--011 **25.00

M. THOMAS

DEC 29 2009

EXAMINER

COVER LETTER

TO:	Registration Sectorision of Corpo				
SUBJE	CT:		pact Digest LLC led Liability Company		
		mendment and fee(s) are sub			
			Richard H. Hornbeck		
		Lions Digest, LLC			
11		70 Tree Swallow Drive		268 D	
Winter Springs, FL 32708 City/State and Zip Code			268 DEC 28 AM IO: 13 SECRETARY OF STATE TALLAHASSEE, FLORIDA		
		E-mail address: (1	ornbeck@gmail.com o be used for future annual report	notification)	OF STAT
For furt	ner information con	ncerning this matter, please c	all:		IDA 3
	Richard Name of	d H. Hornbeck Person	at (_407_)Area Code & D	810-0900 aytime Telephone Number	*****
Enclose	d is a check for the	following amount:			
	00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enc	losed) Certified	e of Status &
		NG ADDRESS:	STREET/CO Registration S	DURIER ADDRESS:	

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

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Market Impac	t Digest LLC	
(Name of the Limited Liability Compa (A Florida Limited I.	ny as it now appears on our records. Liability Company)	.)
The Articles of Organization for this Limited Liability Company Florida document numberL09000071180	were filed on July 24, 200	99 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
Lions Dige	est, LLC	
The new name must be distinguishable and end with the words "Limi "L.L.C."	ited Liability Company," the designati	on "LLC" or the abbreviation
Enter new principal offices address, if applicable:	1170 Tree Swallow Drive	<u> </u>
(Principal office address MUST BE A STREET ADDRESS)	Winter Springs, FL 32708	858 K
Enter new mailing address, if applicable:	1170 Tree Swallow Drive	er sta
(Mailing address MAY BE A POST OFFICE BOX)	Winter Springs, FL 32708	5. 4
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her Name of New Registered Agent: New Registered Office 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 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 = 1	anager Managing Member		
<u>Title</u>	Name	Address	Type of Action
			Add Remove
			Add Remove
	·		Add Remove
			Add Remove
			Add Bremove
			C 28 AM 10: 13 HASSAGEFLORIDA
D. If amer	ding any other information, enter chang	ge(s) here: (Attach additional sheets, if necessary.)	- BE - S
Dated <u>(2</u>	2 24 09	· ((_
	RICHARD H	or or authorized representative of a member HORNBECK d or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00