

L09000077264

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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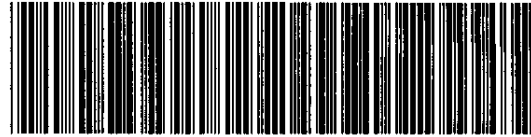
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS  
10 OCT - 1 AM 11:38

T. HAMPTON  
OCT - 4 2010  
EXAMINER

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Regional Multi Media Services  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ENZA SALAMONE

Name of Person

REGIONAL MULTIMEDIA SERVICES LLC

Firm/Company

461 NW 76 Ave Unit 206

Address

MARGATE FL 33063

City/State and Zip Code

REGIONAL LAWYERS @ YAHOO.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ENZA SALAMONE

Name of Person

at (954) 708-5121

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &  
Certificate of Status

☐ \$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐ \$60.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

**MAILING ADDRESS:**

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

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Regional Multimedia Services LLC

(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 9-28-09 and assigned  
Florida document number L09000077264

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
10 OCT - 1 AM 11:33

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

RALPH PIERRO

New Registered Office Address:

461 NW 76 AVE UNIT 206

Enter Florida street address

MARGATE, FL

City

Florida 33063

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

Ralph Pierro

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.

Ralph Pierro  
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	ENZA SALAMONE	461 NW 76 Ave MARGATE FL 33063	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
Registered Agent	ENZA SALAMONE	1451 West Cypress Creek Blvd Suite 300 Ft Lauderdale FL 33209	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
Registered Agent	RALPH Pierro	461 NW 76 AVE MARGATE FL 33063 Unit 206	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	RALPH Pierro	461 NW 76 AVE MARGATE FL 33063 Unit 206	<input checked="" 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 Sept 27, 2010

x Enza Salamone  
Signature of a member or authorized representative of a member  
ENZA SALAMONE  
Typed or printed name of signee

FILED  
10 OCT - 1 AM 11:00  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS