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COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT:	SLID Media, LLC 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:			
	In Shiell		
	Name of Person		
	SLID Media, LLC		
	Firm/Company		
	1711 Fern Forest Pl Address		
	Address		
	Address Delray Beach FL 33407 0 City/State and Zip Code ian 5 @ Slid Media. com E-mail address: (to be used for future annual report notification)		
	in a Calidardia com The		
	E-mail address: (to be used for future annual report notification)		
For further information of	E-mail address: (to be used for future annual report notification) E-mail address: (to be used for future annual report notification) E-mail address: (to be used for future annual report notification) E-mail address: (to be used for future annual report notification) E-mail address: (to be used for future annual report notification)		
	Shiell 55		
	at (56) 702-2740 Area Code & Daytime Telephone Number		
Name o	of Person Area Code & Daytime Telephone Number		
Enclosed is a check for the	he following amount:		
\$25.00 Filing Fee	S30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) 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**

SLID Media, 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 9/24/09 and assigned. Florida document number L0900092493			
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 w "L.L.C."	vords "Limited Liability Company," the designation "LLC" or the abbreviation		
Enter new principal offices address, if applicable:	oress Boca Raton FL 33487		
(Principal office address MUST BE A STREET AD)	Boca Raton, FL 33487		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	945 Clint Moore Road Boca Raton, FL 33487		
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:	Jan Shiell		
New Registered Office Address:	Jan Shiell 945- Clint Moore Road Enter Florida street address Boan Raton, Florida 33487 City Zip Code		
	Boca Raton, Florida 33487 City Zip Code		
New Registered Agent's Signature, if changing Registe			

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

Type of Action Address Title Name Philip Nadel 945 Clint Moore Road Borg Raton, FL 33487 ☐ Add Remove Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated November Signature of a member or authorized representative of a member Tan Shiell
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00