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TALLAHASSEE, FLORIDA

S. HAWKES
NOV 13 2009
EXAMINER

S. HAWKES
NOV 12 2009
EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: iVentures 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:

~~ATP~~ Allison J Price
Name of Person

iVentures Media, LLC
Firm/Company

1235 Sebastian Cove
Address

Heathrow, FL 32746
City/State and Zip Code

Sid.iventuresmedia@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Allison Price at (407) 687-7883
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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**

iVentures 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 10/9/2009 and assigned
Florida document number LO9000097817.

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:

Allison J Price

New Registered Office Address:

1225 Sebastian Cove

Enter Florida street address

Hawthorn

City

Florida

32746

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.

Allison Price
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:

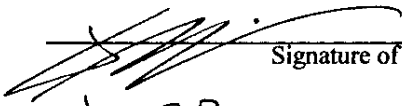
MGR = Manager
MGRM = Managing Member

Title	Name	Address	Type of Action
MGR	James S. Price	1235 Sebastian Cove Heathrow, FL 32746 USA	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	Allison J. Price	1235 Sebastian Cove Heathrow, FL 32746 USA	<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
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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SECRETARY OF FLORIDA

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated November 9, 2009.

 Signature of a member or authorized representative of a member
James S Price Allison Price
Typed or printed name of signee