## L100000023311

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SECRETARY OF STATE
SECRE

J. BRYAN

SEP 2 0 2011

**EXAMINER** 

## **COVER LETTER**

TO: Registration S Division of Co				
SUBJECT:	Buttersc	otch Media LLC		
	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sul	bmitted for filing.		
Please return all corresp	ondence concerning this matter	r to the following:		
		Jason D. Boone Name of Person		
		Firm/Company	THE SE	1
		1826 S Park Ave Address	P 19 PM	FILED
	<del></del>	Titusville FL 32780 City/State and Zip Code	FLORIDE STATE	· •
	E-mail address: (	sonboone@gmail.com to be used for future annual report notifica	tion)	
For further information of	concerning this matter, please of	cal1:		
	son D. Boone of Person	at ( <u>321</u> ) 59 Area Code & Daytime T	91-7630 Telephone Number	
Enclosed is a check for t	he following amount:			
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclose	ed)

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

Butterscotch	Media LLC		
(Name of the Limited Liability Compa (A Florida Limited)	nny as it now appears on our re Liability Company)	ecords.)	
The Articles of Organization for this Limited Liability Company	were filed onMarch	1 2010 and assigned	
Florida document numberL10000023311			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lial	oility company here:		
Boone Docume	entaries LLC		
The new name must be distinguishable and end with the words "Lim"L.L.C."		signation "LLC" or the abbreviation	
Enter new principal offices address, if applicable:	1826 S Park Ave		
(Principal office address MUST BE A STREET ADDRESS)	Titusville FL	<u> </u>	
	32780	三元 5	
		SSE ON IN	
Enter new mailing address, if applicable:	1826 S Park Ave	Fig. 2 0	
(Mailing address MAY BE A POST OFFICE BOX)	Titusville FL	To s	
	32780	RIO	
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:		ls, <u>enter the name of the new</u>	
	Enter Florida street address		
		Torida	
	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 = M MGRM =	anager Managing Member		
<u>Title</u> ,	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
	<del></del>		Add Remove
	<del></del>		Add Remove
<u>.                                    </u>			Add Remove
D. If amer	nding any other information, enter chan	ge(s) here: (Attach additional sheets, if necesso	ury.)
- - -			SEP 19 PM 1: 18 SECRE JARY OF STATE ALLAHASSEE. FIORIDA
Dated	awsen	011 P. Boone	STATE STATE
	Jas	er or authorized representative of a member	

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Filing Fee: \$25.00