5616941639

PAGE 01/03

Division of Corporations

https://efile.sunbiz.org/scripts/efilcovr.exe



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H10000072854 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

: CORPORATE CREATIONS INTERNATIONAL INC. Account Name Account Number : 110432003053

: (561)694-8107 Phone

Fax Number : (561)694-1639

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.*

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN INSIGHT MEDIA LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

D. BRUCE

APR 1 2010

EXAMINER

Electronic Filing Menu

Corporate Filing Menu

Help

H10000072854

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Insign	it Media, LLC			•
(Name of the Limited Liability C (A Florida Lia	company as it now appe nited Liability Company	ars on our records.)		
The Articles of Organization for this Limited Liability Con Florida document numberL10000034483			_ and assi	gned
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limite	ed liability company h	ere:		
The new name must be distinguishable and end with the words "L.L.C."	"Limited Liability Com	pany," the designation "LLC	C" or the a	•
Enter new principal offices address, if applicable:			<u> </u>	
(Principal office address MUST BE A STREET ADDRE	<u>(\$\$)</u>			
,		ć	SE C	نس د
Enter new mailing address, if applicable:				FIT
* **	 			
(Mailing address MAY BE A POST OFFICE BOX)				数 加
B. If amending the registered agent and/or register registered agent and/or the new registered office address Name of New Registered Agent:	red office address on ss here:	our records, enter the	hame of	f the nev
25 - 25 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -				
New Registered Office Address:	Enter Florida street 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

H10000072854

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	<u>Name</u>	Address	Type of Action		
MGR	Maria Ernekr	318 INDIAN TRACE, SUITE 314 WESTON EL 33326	☑ Add □ Remove		
<u>MGR</u>	ADRIAN DE BRASI	318 INDIAN TRACE, SUITE 314 WESTON FL 33326	Add Remove		
			Add Remove		
			Add Remove		
			Add Romove		
<u></u>			Add Romovc		
D. If amending	g any other information, enter change(s)	here: (Attach additional sheets, if necessary)	10 MAR 3		
		タ: 	9 HM 9		
Dated	March 29 , 2010		58		
	Signature of a member or authorized representative of a member				
_	Maria Ernekr, MGR by Diana Urrego as attorney-in-fact Typed or printed name of signee				

Page 2 of 2

Filing Fee: \$25.00