## L10000034989

(Requestor's Name)
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PICK-UP WAIT MAIL
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(Business Entity Name)
(Document Number)
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## COVER LETTER

TO:

**Registration Section Division of Corporations** 

## Top Professional Publishing 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:

Craig Wertkin Name of Person Firm/Company 2901 Clint Moore Road #401 Address Boca Raton, FL 33496 City/State and Zip Code csw@toppropublishing.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:

Aaron Feldman

Name of Person

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

Top Professional Publishir				
( <u>Name of the Limited</u> (/	Liability Compar Florida Limited L	ny as it now appears on our reco iability Company)	rds.)	
The Articles of Organization for this Limited L	iability Company	were filed on 3/31/2010	and assigned	
Florida document number L10000034989	•			
This amendment is submitted to amend the following	owing:			
A. If amending name, enter the new name of	f the limited liab	ility company here:		
Top Pro Media Group, LLC				
The new name must be distinguishable and end wi "L.L.C."	th the words "Limi	ited Liability Company," the desig	nation "LLC" or the abbreviation	
Enter new principal offices address, if applicable:		5801 Congress Avenue, Suite 200		
(Principal office address MUST BE A STREET ADDRESS)		Boca Raton, FL 33487		
Enter new mailing address, if applicable:		5801 Congress Avenue	e, Suite 200	
(Mailing address MAY BE A POST OFFICE BOX)		Boca Raton, FL 33487	SSS SS PROPERTY	
B. If amending the registered agent and/ registered agent and/or the new registered o			enter he name of the new	
		<b></b>		
Name of New Registered Agent:	Michael D. Karsch			
New Registered Office Address:	2000 Glades Road, Suite 300			
	Enter Florida street address			
	Boca Rator	, rio	orida <u>33431</u>	
		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 = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Aaron Feldman	5801 Congress Avenue	_ 🚺 Add
		Boca Raton, FL 33487	Remove
			_
			Add
			Remove
			<del></del>
			Add
			Remove
		AHASA So	2
<del></del>		To Service Ser	Add
		FLORIDA	Remove
			- 
			_ L Add
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. If amending any other inf	formation, enter change(s) here: (Attach additional sheets, if necessary.)
<del> </del>	
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uted July 25	2013
	AllMS
Craig Werth	Signature of a member or authorized representative of a member
	Typed or printed name of signee

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Filing Fee: \$25.00

13 JUL 29 AM II: 38
SECKETANY OF STATE
TALLAHASSEE, FLORIDA