

L100000036703

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. Culligan DEC 14 2012

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: TRAVIS LICENSE PARTNERS 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:

ROBERT T. TOUCHTON
Name of Person

TRAVIS LICENSE PARTNERS LLC
Firm/Company

9330 OLMSTEAD DR.
Address

LAKE WORTH, FL. 33467
City/State and Zip Code

BOB@TRAVISMEDIA.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ROBERT TOUCHTON at (561) 459 5038
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 14, 2012

ROBERT T. TOUCHTON
9330 OLDMSTEAD DRIVE
LAKE WORTH, FL 33467

SUBJECT: TRAVIS LICENSE PARTNERS L.L.C.
Ref. Number: L10000036703

We have received your document for TRAVIS LICENSE PARTNERS L.L.C. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must insert the letters "MGRM" beside the name and address of each managing member and/or the letters "MGR" beside the name and address of each manager listed in the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Neysa Culligan
Regulatory Specialist II

Letter Number: 812A00027534

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED
2012 DEC 14 PM 2:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRAVIS LICENSE PARTNERS 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 04/05/2010 and assigned Florida document number L 10000036703

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:

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

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> | <u>Address</u> | <u>Type of Action</u> |
|--------------|---------------------------------|---|--|
| | CARLINE CLERGE-LEGER | 1920 PALM BEACH LAKES BLVD. #217 WEST PALM BEACH, FL 33409 | <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove |
| | DAVID URBACH | 14306 LAKEWOOD HATS BLVD. LAKEWOOD, VA, 94107 | <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove |
| MGRM | ROBERT TRAVIS TOUCHTON | 9330 OLIVESTAD DR. LAKE WORTH, FL, 33467 | <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 |
| | | | <input type="checkbox"/> Add <input type="checkbox"/> Remove |

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

ADD MEMBERS: CARLINE CLERGE-LEGER
1920 PALM BEACH LAKES BLVD. #217
WEST PALM BEACH, FL. 33409
DAVID URBACH
14306 LAKEWOOD HGT BLVD.
LAKEWOOD, OH. 44107

Dated NOVEMBER 9, 2012.

Robert Touchton
Signature of a member or authorized representative of a member
ROBERT TOUCHTON
Typed or printed name of signee

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Filing Fee: \$25.00

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TALLAHASSEE, FLORIDA