110000038303

	(Requestor's Name)
	(Address)
	(4.11
	(Address)
	(City/State/Zip/Phone #)
PICK-I	UP WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
	Octanoacco of Octatos
	no to Eiling Officer

Special Instructions to Filing Officer:

L. SELLERS

DEC 1 0 2010

EXAMINER

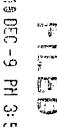
Office Use Only



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SECREMA (OF STATE ALLAHOSTORIDA



COVER LETTER

TO: Amendment Section
Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORI	PORATION:	BOOST DIGITAL MEDIA	LLC	
DOCUMENT NU	MBER:	L10000038503		
The enclosed Artic	cles of Amendment and fee a	are submitted for filing.		
Please return all co	orrespondence concerning th	is matter to the following:		
	N	Joel Hackman Name of Contact Person		
	В	oost Digital Media Firm/ Company	·	
	1	718 NW 22nd Ter Address		
		ainesville, FL 32605 City/ State and Zip Code		
	joel@v E-mail address: (to be use	weboostyou.com d for future annual report notification)		
For further informa	ation concerning this matter,	please call:		
	Joel Hackman of Contact Person	at (<u>561</u>) <u>3</u> Area Code & Daytime Te	08-8421 lephone Number	
Enclosed is a check	k for the following amount n	nade payable to the Florida Depar	rtment of State:	
☑ \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Adamendment Division of		Street Address Amendment Section Division of Corporations		

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301



November 18, 2010

JOEL HACKMAN 1718 NW 22ND TERRACE GAINESVILLE, FL 32605

SUBJECT: BOOST DIGITAL MEDIA LLC

Ref. Number: L10000038503

We have received your document for BOOST DIGITAL MEDIA LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

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) 245-6967.

Letter Number: 610A00027099

Leslie Sellers Regulatory Specialist II

www.sunbiz.org

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Lix	OST DIGITAL MEDIA ability Company as it now appears on our records.)
(A Fl	orida Limited Liability Company)
The Articles of Organization for this Limited Liab	ility Company were filed on 04/08/2010 and assigned
Florida document numberL1000003850	
This amendment is submitted to amend the following	ing:
A. If amending name, enter the new name of th	e limited liability company here:
The new name must be distinguishable and end with the "L.L.C."	he words "Limited Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicabl	le:
(Principal office address MUST BE A STREET A	ADDRESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BO	<u> </u>
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our records, enter the name of the neve e address here:
Name of New Registered Agent:	Do ab
New Registered Office Address:	
	Enter Florida street address
-	Florida Florida
	City SZip@ode
New Registered Agent's Signature, if changing Reg	istered Agent: මුෆ් ය

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 amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Managing Member					
<u>Title</u>	<u>Name</u>	Address	Type of Action		
MGRM_	Jonathan Ciaccio	1718 NW 22nd Ter Gainesville, FL 32605	Add _ ☑ Remove		
	<u></u>		Add Remove		
	 		Add Remove		
			Add Remove		
			Add Remove		
			Add Remove		
D. If amendin	ng any other information, enter chang	ge(s) here: (Attach additional sheets, if necessary.)	_		
_			-		
			_		
Dated	1 Nach	lmn —			
_	Signature of a member	r or authorized representative of a member Joel Hackman or printed name of signee			

Page 2 of 2

Filing Fee: \$25.00