L10000063634

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JUL 1 9 2010 EXAMINER

COVER LETTER

TO: Registration Section

SUBJECT:	Bay Lar	go Media, LLC		
		ted Liability Company		
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.		
Please return all corresp	condence concerning this matter	to the following:		
•		Gary H. Baker		
		Name of Person		
		Gary H. Baker, P.A.		
		Firm/Company		
	3001	3001 Executive Drive, Suite 390		
		Address		
		Clearwater, FL 33762		
		City/State and Zip Code		
£1. *	GHBa	ker@GaryBakerLaw.com Action to be used for future annual report notification)	· .	
for further information	concerning this matter, please of	all:		
C	Sary H. Baker	at (_727)561-0	066	
	of Person	Area Code & Daytime Teleph		
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)	
Regis Divis P.O.	LING ADDRESS: stration Section ion of Corporations Box 6327 hassee, FL 32314	STREET/COURIER AD Registration Section Division of Corporations Clifton Building 2661 Executive Center Cir Tallahassee, FL 32301		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2010 JUL 16 PH 18 17

Bay Lar	go Media, LLC	SECRET	ARY OF STATE SSEE. FLORIDA
(Name of the Limited Liability C (A Florida Lin	ompany as it now appearanted Liability Company)	ars on our records.)	
The Articles of Organization for this Limited Liability Cor	npany were filed on	June 15, 2010	and assigned
Florida document number L10000063634			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limite	d liability company he	ere:	
IPS of B	Bay Largo, LLC		
The new name must be distinguishable and end with the words "L.L.C."	"Limited Liability Comp	pany," the designation "LI	C" or the abbreviation
Enter new principal offices address, if applicable:			·- <u>-</u>
(Principal office address MUST BE A STREET ADDRE	SS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
			
B. If amending the registered agent and/or register registered agent and/or the new registered office addresses		our records, enter th	e name of the new
Name of New Registered Agent:			
New Registered Office Address:	F	nter Florida street addr	ess
	City	, Florida	Zin 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 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 ☐ Add Remove Add Remove ☐ Add Remove Add Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) July 13 2010 Dated _____ Signature of a member or authorized representative of a member Gary H. Baker, attorney and authorized representative of Mark Mastrini Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00