

L1000000 96114

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900210440879

07/29/11--01030--008 **25.00

2011 JUL 29 PM 12:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

T. CLINE

AUG - 1 2011

EXAMINER

Nico Rouge Media Group, .L.L.C.
800 Parkview Dr, STE 226, Hallandale Beach, FL 33009
Tel. 305-490-9211, www.colettemagazineusa.com



July 25, 2011

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RE: NICO ROUGE MEDIA GROUP, L.L.C.

Dear Sir/Madam

Enclosed please find a request for Managing Members Amendment in accordance with the page 2 of the Application.

Should you have any question or concern regarding this matter, please feel free to contact us at the information above. Thank you so much for your consideration of working together. Looking forward to receiving a positive reply from you.

Best regards,

A handwritten signature in black ink, appearing to be 'N. Andrews'.

Nathalee N. Andrews

FILED
2011 JUL 29 PM 12:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
✓ Division of Corporations

SUBJECT: NICO ROUGE MEDIA GROUP, L.L.C.
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:

NATHALEE NICOLETTE ANDREWS

Name of Person

NICO ROUGE MEDIA GROUP, L.L.C.

Firm/Company

800 PARKVIEW DR, STE 226

Address

HALLANDALE BEACH, FL 33009

City/State and Zip Code

nicorougemedi@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

NATHALEE NICOLETTE ANDREWS

Name of Person

at (305)

490-9244

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

2011 JUL 29 PM 12:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

NICO ROUGE MEDIA GROUP, L.L.C.

(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 09/14/2010 and assigned
Florida document number L10000096114.

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: NATHALEE NICOLETTE ANDREWS


New Registered Office Address: 800 PARKVIEW DR., STE 226

Enter Florida street address

HALLANDALE BEACH, Florida 33009
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>
MGRM	NATALYA KOCHNEVA	800 PARKVIEW DR. STE 226 HALLANDALE BEACH, FL 33009	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	NATHALEE N. ANDREWS	800 PARKVIEW DR. STE 226 HALLANDALE BEACH, FL 33009	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	IRINA KOCHNEVA	800 PARKVIEW DR. STE 226 HALLANDALE BEACH, FL 33009	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	ELENA ZHIRNOVA	3132 STONEHURST CIR. KISSIMMEE, FL 34741	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	SERGEY KOCHNEV	800 PARKVIEW DR. STE 226 HALLANDALE BEACH, FL 33009	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

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

2011 JUL 29 PM 12:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

Dated JULY 25, 2011.

Signature of a member or authorized representative of a member

Typed or printed name of signee