

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : THE LAW OFFICES OF NICK SPRADLIN PI

Account Number: I2007000020

: (813)435-3176

Phone Fax Number

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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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Corporate Filing Menu

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NICK SPRADLIN

06/01/2029 01:02 FAX 8133336358 HII 000 138 8023

> ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

11 MAY 24 AM 9: 40

56 UNE TARY OF STATE
TALLAHASSEE, FLORIDA

	COGIATE	MEDIA, LLC		
(Nan	e of the Limited Liability Compa (A Flonda Limited	any as it now appears of Liability Company)	n our records.)	
	(1 2 1 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	,		
The Articles of Organization fo	r this Limited Liability Compan	y were filed on <u>09/2</u>	9/2010	and assigned
Florida document number	L10000101863 .			
This amendment is submitted to	amend the following:			
A. If amending name, enter t	he new name of the limited lia	bility company here:		
RAMCO INTERNATION	AL, LLC			
The new name must be distinguis "L.L.C."	hable and end with the words "Lin	nited Liability Company,	" the designation	"LLC" or the abbreviation
Enter new principal offices ac	ldress, if applicable:	10741 SW 142 AV	/E.	
(Principal office address MUS	T BE A STREET ADDRESS)			
		MIAMI, FLORIDA	A 33186	
Enter new mailing address, if	applicable:	10741 SW 142 AV	/E	
(Mailing address MAY BE A I	POST OFFICE BOX)			
·		MIAMI, FLORIDA	A 33186	
	red agent and/or registered o		records, enter	the name of the new
Name of New Registe	red Agent:	· <u>-</u>		
New Registered Offic	e Address:	F-/	Vlovida stract as	ldrace
		Enter Florida street address		
	 		, Florida _	7:- 0 - 2-
		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

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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

Title	Name	<u>Address</u>	Type of Action
MGR	MARIANELLA LEON	12000 NORTH DALE MABRY HWY SUITE 110 TAMPA, FLORIDA 33618	Add Remove
MGRM	PAOLA COLON-RAMIREZ	10741 SW 142 AVE. MIAMI, FLORIDA 33186	Add Remove
MGRM	ALVARO RAMIREZ	10741 SW 142 AVE. MIAMI, FLORIDA 33186	Add Remove
MGRM	ANGEL COLON	10741 SW 142 AVE. MIAMI, FLORIDA 33186	Add Remove
			AddRemove
			Add
D. If amen	ding any other information, enter ch	nange(s) here: (Attach additional sheets, if necess	ary.)
· .			· · · · · · · · · · · · · · · · · · ·
Dated		<u>2011 </u>	
		mber or authorized representative of a member (A (-CO) /ped or printed name of signee	

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