L11000022997

| (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: | | | | |
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SECRETARY OF STATE AHASSEE, FLORID

J. BRYAN

MAR 22 2011

EXAMINER

COVER LETTER

Registration Section

TO:

| Division of Co | rporations | | |
|--|--|---|--|
| SUBJECT: | D&B So | cial Media, LLC | |
| | Name of Limi | ted Liability Company | |
| The enclosed Articles of | f Amendment and fee(s) are sub | omitted for filing. | |
| Please return all corresp | ondence concerning this matter | to the following: | |
| | | Bradford W. Lindberg | |
| | | Name of Person | |
| | | D&B Media Group | |
| | | Firm/Company | rae = |
| | 760 | 5 Weeping Willow Circle | CRE H |
| | | Address | |
| | | Onwards El 04044 | HAR 21 PH 12: 59 SECRETARY OF STATE FALLAHASSEE, FLORID |
| | | Sarasota, FL 34241 City/State and Zip Code | |
| | bw | • | 98 59 REFE |
| | E-mail address: (| lindberg@comcast.net to be used for future annual report notificati | on) |
| For further information | concerning this matter, please of | eall: | |
| В | rad Lindberg | &t \ | 6-0338 |
| Name of Person | | Area Code & Daytime Te | elephone 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 Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 32301 | ons r Circle |

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| D&B | Social Media, LLC | | | |
|---|--|--------------------------|--------------------------|--|
| (<u>Name of the Limited Liabil</u> (A Florid | ity Company as it now appear a Limited Liability Company) | s on our records. | | |
| · | , , | | | |
| The Articles of Organization for this Limited Liability | Company were filed on | 02/23/2011 | and assigned | |
| Florida document number L11000022997 | · | .• | 韶主机 | |
| This amendment is submitted to amend the following: | | | THAR 21 PHIZ: 58 | |
| A. If amending name, enter the new name of the li | mited liability company here | 2: | ind ? | |
| D&B | Media Group, LLC | | 757 | |
| The new name must be distinguishable and end with the w"L.L.C." | , · | ny," the designation " | LLC" or the abbreviation | |
| Enter new principal offices address, if applicable: | | | | |
| (Principal office address MUST BE A STREET ADD | DRESS) | | | |
| | | | | |
| | | | | |
| Enter new mailing address, if applicable: | | | | |
| (Mailing address MAY BE A POST OFFICE BOX) | | | | |
| | | | | |
| | - N | | | |
| B. If amending the registered agent and/or reg | istered office address on o | ur records, <u>enter</u> | the name of the new | |
| registered agent and/or the new registered office ad | idress nere: | | | |
| Name of New Registered Agent: | | | | |
| | | | | |
| New Registered Office Address: | | F1 +1 | <u>,</u> | |
| | 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 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 = Manager

| MGRM = N | MGRM = Managing Member | | | | | |
|---------------------------------------|-----------------------------------|--|--------------------------|--|--|--|
| <u>Title</u> | <u>Name</u> | Address | Type of Action | | | |
| | | | Add Remove | | | |
| | | | | | | |
| | | | Add Remove | | | |
| | | | Add Remove | | | |
| | | | Add Remove | | | |
| · · · · · · · · · · · · · · · · · · · | | | AddRemove | | | |
| | | | Add ☐Remove | | | |
| D. If amend | ling any other information, enter | change(s) here: (Attach additional sheets, if necess | | | | |
| | | | FILE IN MAR 21 P | | | |
| Dated | March 15 | 2011 | PHI2: 59 OF STATE LORIDS | | | |
| | | nember or authorized representative of a member | | | | |
| | | Typed or printed name of signee | | | | |

Page 2 of 2

Filing Fee: \$25.00