Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H11000240050 3)))



H110002400503ABCN

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Email Address:

Account Name : CSH SERVICES, LLC Account Number : I20070000160

Phone : (800)494-3124

Fax Number : (561) 455-9885

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

 ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	· <u></u>			

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN DITTO MOBILE MEDIA LLC

Certificate of Status	0
Certified Copy	j o
Page Count	03
Estimated Charge	\$25.00

Electronic Filing Menu Corporate Filing Menu

Help

J. SAULSBERRY **EXAMINER**

OCT 4 2011

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

H11000240050 3

J	DITTO MOBILE	MEDIA LLC .				
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)						
(A Fibrida Ellimica Elabitity Company)						
The Articles of Organization for this Limited Liability Company were filed on and assig					gssigned	
Florida document number L11000025194				SE ASI	_	
This amendment is submitted to amend the follow A. If amending name, enter the new name of t	lity company h	ere:	TARY ASSET	FILEI		
SUGAR INDUSTRIES LLC				PS		
The new name must be distinguishable and end with "L.L.C."	the words "Limit	ed Liability Com	pany," the designation	"LIBERTIN	cabbreviation	
Enter new principal offices address, if applical	ole:	1521 ALTON	ROAD, STE 712			
(Principal office address MUST BE A STREET	ADDRESS)	MIAMI BEACH, FLORIDA 33139				
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u>0x)</u>	PO BOX 738 SANTA MONICA, CALIFORNIA 90406				
B. If amending the registered agent and/or registered agent and/or the new registered offi			our records, <u>ente</u>	<u>r the name</u>	of the new	
Name of New Registered Agent:	AGENTS AND	CORPORATIO	NS, INC.			
New Registered Office Address:	New Registered Office Address: 300 5TH AVENUE S, STE 101-330					
	(Enter Florida street address)					
	NAPLES		, Florida	34102		
		(City)	·	(Zip C	ode)	
New Registered Agent's Signature, if changing Re	gistered 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)

Page 1 of 2

H11000240050 3

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:

H11000240050 3

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	<u>T</u>	pe of Ac	<u>tion</u>
MGRM	FLIPP DIRECT HOLDINGS PTY LTD	35 FULCHER RD RED HILL QU 4059 AU		Add Remove	
-	·			Add Remove	
				Add Remove	
D. If an	nending any other information, enter change	(s) here: (Attach additional sheets, if necess	SECRETAR) TALLAHASSI	2011 OCT -3	
Dated	OCTOBER 03 , 201	~K	OF STATE E.FLORIDA	AH 8: 30	
	A	or authorized representative of a member A.K. POSNIAK or printed name of signee			

Page 2 of 2