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COVER LETTER .

TO: Registration Secti Division of Corpo			
CUDIECT.	QUIXOTIC	PUBLISHING, LLC	
SUBJECT:	Name of Limi	ted Liability Company	
The enclosed Articles of Ar	nendment and fee(s) are subr	mitted for filing.	
Please return all correspond	ence concerning this matter	to the following:	
	II	ENNIFER L. JACKSON	
		Name of Person	
		Firm/Company	
		10586 MISTY LANE	
		Address	
	ROYA	L PALM BEACH, FL 3341	1
		City/State and Zip Code	O.V.
		PUBLISHING@YAHOO.Co o be used for future annual repo	
For further information con-	cerning this matter, please ca	·	,
JENNIFER L.	JACKSON	561 at ()	301-3502
Name of P	erson	Area Code I	Daytime Telephone 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	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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

-	KOTIC PUBLISHING, LLC		
(<u>Name of the Limited Lia</u> (A Flo	bility Company as it now appears on our rida Limited Liability Company)	reçords,)	
The Articles of Organization for this Limited Liability Florida document numberL11000044630	y Company were filed onAPI	RIL 14, 2011	and assigned
This amendment is submitted to amend the following	;		
A. If amending name, enter the new name of the l	imited liability company here:		
The new name must be distinguishable and contain the words "	Limited Liability Company," the designation	on "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applicable:	<u> </u>		
(Principal office address MUST BE A STREET AD	DRESS)		
		"	
T			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or re registered agent and/or the new registered office a Name of New Registered Agent:			he name of the new
New Registered Office Address:	10586 MISTY I	_ANE	
New Registered Office Address.	Enter Florida stree	t address	
<u> </u>	ROYAL PALM BEACH	, Florida	33411
	City		Zip Code
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered age provisions of all statutes relative to the proper an accept the obligations of my position as registered being filed to merely reflect a change in the regist	nt and agree to act in this capacit d complete performance of my dut l agent as provided for in Chapter	ties, and I am fa 605, F.S. Or, i	miliar with and If this document is
company has been notified in writing of this chang			602 C-3
	Docks		390 TI
	If Changing Registered Agent, Sign	nature of New Reg	
	Page 1 of 3	of s	D D

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	AMY G. WRIGHT	6772 HATTERAS DRIVE	Add
		LAKE WORTH, FL 33467	■ Remove
			☐ Change
			Remove
			Change
			Add
			☐ Remove
			☐ Change
	NOTE		Add
			☐ Remove
			□ Change
			Add
			☐ Remove
			□ Change
			Change Change
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			<u> </u>
			
			
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(If an effective	late, if other than the date of e date is listed, the date must be spec	f filing:	(optional) n 90 days after filing.) Pursuant to 605.02
(If an effective Note: If the	e date is listed, the date must be spece e date inserted in this block doe	f filing:	1 90 days after filing.) Pursuant to 605.02
(If an effective Note: If the	e date is listed, the date must be spec	f filing:	1 90 days after filing.) Pursuant to 605.02
(If an effective Note: If the document's	e date is listed, the date must be spece date inserted in this block does effective date on the Departme	f filing:	n 90 days after filing.) Pursuant to 605.02 rements, this date will not be listed
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