L11000083004

(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



000210827060

08/15/11--01008---013 **25.00

FILED III AUG 15 PM 2:50 SECRETARY OF STATE SECRETARY OF STATE

J. BRYAN

AUG 1 5 2011

EXAMINER

COVER LETTER

то:	Registration Section Division of Corporations
SUBJI	ECT: SAWJETZ MEDIA, LLC Name of Limited Liability Company
The en	closed Articles of Amendment and fee(s) are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	Name of Limited Liability Company closed Articles of Amendment and fee(s) are submitted for filing. return all correspondence concerning this matter to the following: Name of Person Name of Person
	SA WYER MEDIA Firm/Company
	12863 HOLDENBURY LANE
	City/State and Zip Code Ty C TySAWER. Com E-mail address: (to be used for future annual report potification)
	E-mail address: (to be used for future glinual report potification)
For fu	ther information concerning this matter, please call:
	WILLIAM SAWYER at 407, 921 · 3454 Name of Person Area Code & Daytime Telephone Number
Enclos	ed is a check for the following amount:
\$25	5.00 Filing Fee \$\ \text{Certificate of Status} \text{S55.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)} \text{S60.00 Filing Fee, 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

S'AW96	MEDIA,	LLC
(<u>Name of the Limited Liability (</u> (A Florida Li	Company as it now appears on mited Liability Company)	our records.)
The Articles of Organization for this Limited Liability Con Florida document number <u>L 110000830</u>	ompany were filed on	19, 20 M and assigned
This amendment is submitted to amend the following:		A.
A. If amending name, enter the new name of the limite	ed liability company here:	
The new name must be distinguishable and end with the words "L.L.C."	s "Limited Liability Company,"	the designation "La Coron the abbreviation
Enter new principal offices address, if applicable:	- The state of the	200 55
(Principal office address MUST BE A STREET ADDRE	ESSS)	SE SE
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered registered agent and/or the new registered office addre		records, <u>enter the name of the new</u>
Name of New Registered Agent:		
New Registered Office Address:	Enter F	lorida street address
	City	, Florida 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>	Name	Address	Type of Action			
marm	Ashley L Bringman	12863 Holden Dury lane Win 000 mence, Fi 3478	Add _ E Remove			
			Add Remove			
			Add Remove			
			Add Remove			
			Add Remove			
···			Add Remove			
D. If amendin	g any other information, enter change(s	s) here: (Attach additional sheets, if necessary.)	_			
Dated	yust 10, 2011	ALL AHASSEE, FLORIDA	FILED 11 AUG 15 PM 2:58			
_		authorized representative of a member WILLAM AWYER printed name of signee				

Page 2 of 2

Filing Fee: \$25.00