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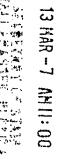
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Cover Sheet

Change in LLC name submitted by:

Work At Home Mafia LLC

Change submitted by:

Kimberly Artlip 8165 102nd Avenue Vero Beach FL 32967

Business # - 772-202-0857 Home # - 772-918-8610

http://form.sunbiz.org/pdf/cr2e049.pdf

COVER LETTER

TO:

Registration Section

Division of Corporations'

SUBJECT:

Work At Home Matia LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Kimberly Arthup

Work At Home Mosea LLC Firm/Company

8165 102nd Avenue

Vero Beach, FL 32967
City/State and Zip Code

Kim@ techronicle.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kimberly Artlip
Name of Person

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 ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	ne Mafia LLC		
(Name of the Limited Liability (A Florida Li	Company as it now appears on our recor imited Liability Company)	ds.)	
The Articles of Organization for this Limited Liability Co		and assigned	
Florida document number	<u>&</u>		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limit	ted liability company here:		
Sand Dollar	Media Group LL	<u>.</u> C	
The new name must be distinguishable and end with the word "L.L.C."			
Enter new principal offices address, if applicable:		βουρου (Δ)	
(Principal office address MUST BE A STREET ADDRI	ESS)	the state of the s	
		2011 20	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered agent and/or the new registered office address.		enter the name of the new	
Name of New Registered Agent:			
New Registered Office Address:	Entar Florida et	and address	
	Enter Florida street address		
	, Flor	ridaZip 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

- cr2c049.pdf 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:

MGRM = Managing Member				
<u>Title</u>	<u>Name</u>	Address	Type of Action	
-			Add	
			Remove	
	 		Add	
			Remove	
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			Add	
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MGR = Manager

r2e049.pdf	http://form.s	unbiz.org/pdf/cr2e049.pdf
D. If amen	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
	•	
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		_
Dated	3-5-13	
	Signature of a member or authorized representative of a member	
	Signature of a metabler or authorized representative of a member	
	Rimberly Arterp Typed or printed name of signee	
	Typed or printed name of signee	
	Page 3 of 3	

Filing Fee: \$25.00