(Req	uestor's Name)	
(Add	lress)	
(Add	Iress)	
(City	//State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bus	iness Entity Nar	me)
(Doc	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	Filing Officer:	

Office Use Only



000237549480

07/18/12--01023--002 **25.00

D. BRUCE

JUL 19 2012

EXAMINER

COVER LETTER

TO:

Registration Section

Division of C	orporations		
SUBJECT:	lionaire Dig	Hed Liability Company	-
	Name of Lim	тей главину Сотрану	
The enclosed Articles	of Amendment and fee(s) are su	bmitted for filing.	
Please return all corres	pondence concerning this matte	r to the following:	
	Cassi Obo	Name of Person	
	Blionair	c Digital Modia	- -
	1743 N. SI	Edgwick St.	- : 1
	Chicago	City/State and Zip Code	12 JUL SECRET/ ALLAHA
	Cassi. olser E-mail address:	(to be used for future annual report notification)	AND FILED FILED 18 PM NRY OF SSEELF
For further information	concerning this matter, please	call:	16 2
Namo	e of Person	at (Area Code & Daytime Telephone Numb	oer .
	r the following amount:		
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed) Certific	Filing Fee, cate of Status & ed Copy onal copy is enclosed)
	r •		
Regi: Divis P.O.	LING ADDRESS: stration Section sion of Corporations Box 6327 hassee, FL 32314	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

<u>. 11</u>

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BILLIONAIRE DIGITAL MEDIA, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Lial		ere filed on <u>Fe br</u>	uary 072	ما and assi	gned
Florida document number <u>L120000 180</u>	72		<i>J</i> ^	•	
This amendment is submitted to amend the follow	wing:		`		
A. If amending name, enter the new name of t	the limited liabilit	y company here:			
Above The Influence					
The new name must be distinguishable and end with "L.L.C."	the words "Limited	Liability Company,	" the designation '	'LLC" or the al	obreviation
Enter new principal offices address, if applical	ble:				
(Principal office address MUST BE A STREET	ADDRESS)				
	-				
Enter new mailing address, if applicable:				IZ JI SECR	,
(Mailing address MAY BE A POST OFFICE B	<i>OX</i>)		·	HAS:	
				% 	LEAN C
			_	7 S S	0 VE
B. If amending the registered agent and/or registered agent and/or the new registered offi	registered office ce address here:	e address on our	records, <u>enter</u>	the name of	the new
		,	`		
Name of New Registered Agent:			<u> </u>		
New Registered Office Address:					
		Enter	Florida street ad	dress	
			, Florida	7in Code	
	ſ	111/		1111 (1)110	

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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

	<u>Name</u>	Address]	Type of Action
_			[Add Remove
				Add Remove
_			<u>_</u>	Add
				Remove
-				Add Remove
_				Add
				Remove
<u>-</u>				Add Remove
men	ding any other information, enter cha	nge(s) here: (Attach additional shee	ets, if necessary	12
			RETAR	FILI FILI
			E. T.C.	ROYEL ND LED PM 12: 21
				· · · · · · · · · · · · · · · · · · ·
		-		
	1	<u> </u>		
	- Caru Ob	ber or authorized representative of a me		

Page 2 of 2

Filing Fee: \$25.00