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B. BOSTICK
FEB - 5 2013
EXAMINER

COVER LETTER

TO: Registration Sec Division of Corp		and the second s	* * * * * * * * * * * * * * * * * * *		
SUBJECT:	aty Distaict	Publishing, LLC ed Liability Company			
The enclosed Articles of A	mendment and fee(s) are subn	nitted for filing.			
Please return all correspon	dence concerning this matter t	o the following:			
	Ryon K	. Royes Name of Person			
	•	Firm/Company	110		
	3610 NW 213	Street Apt 400 Address	2		
	Lauderdale	Lakes, FL. 333	11		
	wedietydis E-mail address: (to	Lakes, FL. 333 City/State and Zip Code trict@gmail.com be used for luture annual report notified	M ntion)	13 FEB -4	<u>-n</u>
For further information co	ncerning this matter, please ca	11:			
Ryon R. Name of	Royes Person	at (<u>954)</u> 793-8 Area Code & Daytime	749 Telephone Number	PH 5: 37	Ö
Enclosed is a check for the	e following amount:			DA DA	
\$25.00 Filing Fee	□\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy	□\$60.00 Filing Certificate o		

(additional copy is enclosed)

MAILING ADDRESS:

Registration Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Certified Copy

(additional copy is enclosed)

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

1011.1.

Diaty Vistaict Rub	lishing, LLC	
(Name of the Limited Liability Comp (A Florida Limited	any as it now appears on our Liability Company)	r records.)
The Articles of Organization for this Limited Liability Companies Florida document number <u>∠/2</u> @@@@44@52.	ny were filed on <u>3/3c</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia		
HOUSE OF DIGITAL PO	JBLISHING, LI	L C
The new name must be distinguishable and end with the words "Lir" L.L.C."	nited Liability Company," the	designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		· · · · · · · · · · · · · · · · · · ·
(Principal office address MUST BE A STREET ADDRESS)	NA	<u>Ας.</u> ώ
		22 77
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	MA	-4 PK 5:37
B. If amending the registered agent and/or registered registered agent and/or the new registered office address he	office address on our rec ere:	ords, enter the name of the new
Name of New Registered Agent:	*//	
New Registered Office Address:	MA Enter Flor	rida street address
	•	
	City	_, Florida Zip Code
New Registered Agent's Signature, if changing Registered Agen	<u>ıt:</u>	

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 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 MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
	/		Remove
	NA		Add Remove
	NA		Add
	MA		13 FEB -4 PM 5: 37 SLUME LASSEE, FLORIDA
	NA		Add Remove
	MA		Add Remove

D. If ame	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
-	
-	MA
_	
Dated	01/30/2013 January 30 203 m
	Signature of a member or authorized representative of a member Rvon R. Royes
	Typed or printed name of signee Page 3 of 3

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