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MAY 1 7 2012 T. HAMPTON

COVER LETTER

TO:	Registration Section Division of Corporations	, ,	÷ ¢	4.	•
SUBJE	CCT:	RCH CITY PL	JBLICATIONS, LI	LC	
50 D 31			ted Liability Company	· · · · · · · · · · · · · · · · · · ·	and the second s
The en	closed Articles of Amendmen	nt and fee(s) are sub	mitted for filing.		
Please	return all correspondence cor	ncerning this matter	to the following:		
			ANTHONY HINDS		
			Name of Person		
		RICH C	ITY PUBLICATIONS	S, LLC	
			Firm/Company		
			P.O.BOX 101382		
			Address		
		PALI	M BAY, FLORIDA 32	2907	·
			City/State and Zip Code		·
		RICHARDA E-mail address: (t	ANTHONY606@GM to be used for future annual re	AIL.COM port notificati	on)
For fur	ther information concerning	this matter, please c	all:		
	ANTHONY H	IINDS	at (321)	50	1-9483
	Name of Person		Area Code & Daytime Telephone Number		
Enclos	ed is a check for the followin	ng amount:			
[] \$2 5		0 Filing Fee & rtificate of Status	S55.00 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



12 MAY 16 AM 11: 12

RICH CITY PUBLICATIONS, 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 Liability C	Company were filed on _	MAY 09, 2012	and assigned
Florida document numberL12000062503	•		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lim	ited liability company h	<u>iere</u> :	
RICH CITY ENTE	ERTAINMENT GROU	JP, LLC	
The new name must be distinguishable and end with the wor "L.L.C."	rds "Limited Liability Com	npany," the designation "LL	C" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDI	RESS)		
Enter new mailing address, if applicable:			<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered agent and/or the new registered office add		our records, <u>enter th</u>	e name of the new
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
		, Florida	
	City		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 anfending 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 = Ma MGRM = N	nager Ianaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			□ Remove
			D Domovo
			Add Remove
			AddRemove
			□ Pemove
D. If amend	ding any other information, ente	er change(s) here: (Attach additional sheets,	SECRETARY OF STATE DIVISION OF CORPORATIONS 12 MAY 16 AM 11: 12
Dated	MAY 14	, <u>2012</u> .	· ·
	Signature of	amember or authorized representative of a mem	ber
		ANTHONY HINDS	
		Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00