## L12000079184

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
		MAIL
(Bu	isiness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
	,	
	Office Use On	



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APR 2 2 2013 T. HAMPTON

TO: Registration Se Division of Co			
SUBJECT: Edito	rial 360, LLC		
501012011	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
	ondence concerning this matter		
	Gui	illermo Galvan	
	·····	Name of Person	
	ACCTAX Acc	ounting & Tax Se	rvices
		Firm/Company	
	7828 NW 44	ST Suite B	
		Address	
	Sunrise FL 3	33351	
		City/State and Zip Code	
	ataxser@yahoo.c		
		to be used for future annual report noti	fication)
For further information c	concerning this matter, please e		
Guillermo (	Galvan	at ( <u>954</u> ) <u>839.7</u>	013
Name c	of Person	Area Code Daytim	e Telephone Number
Enclosed is a check for t	he following amount:		
□ S25.00 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 Sta Certified Copy

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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atus & (additional copy is enclosed)

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



April 4, 2014

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GUILLERMO GALVAN ACCTAX ACCOUNTING & TAX SERVICES 7828 NW 44 ST - STE B SUNRISE, FL 33351

SUBJECT: EDITORIAL 360, LLC Ref. Number: L12000079184

We have received your document for EDITORIAL 360, LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tammy Hampton Regulatory Specialist III

Letter Number: 514A00007288

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Editorial 360, LLC				
(Name of the Limit	ed Liability Comp (A Florida Limited	<mark>any as it now appears on our records.</mark> Liability Company)		
The Articles of Organization for this Limited L Florida document number <u>L1200007918</u> 4	iability Company <b>4</b>	y were filed on 06/14/2012	SEGRE 1477	
This amendment is submitted to amend the foll-	owing:			
A. If amending name, enter the new name o	<u>f the limited lial</u>	<u>bility company here</u> :		
in blank				
The new name must be distinguishable and end with the	words "Limited Lia	bility Company," the designation "LLC	" or the abbreviation L.L.C."	,
Enter new principal offices address, if applic	able:	in blank		
(Principal office address MUST BE A STREE	<u>ST ADDRESS)</u>			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE	<u>BOX)</u>			
B. If amending the registered agent and registered agent and/or the new registered of	0	-	enter the name of the n	<u>ew</u>
Name of New Registered Agent:	in blank			
New Registered Office Address:				

Enter Florida street address

Zip Code

, Florida

New Registered Agent's Signature, if changing Registered Agent:

1

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 605, 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.

City

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

If amending the Managers or Authorized Member on our records, <u>enter the title, name, and address of each Manager or</u> <u>Authorized Member being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGRM	Maria G. Duran	5310 NE 6 Ave. 14A	Add
		Fort Lauderdale	Remove
		FL 33334	
MGRM	Roberto Minvielle	5310 NE 6 Ave. 14A	Add
		Fort Lauderdale	Remove
		FL 33334	
		·	□ Add
	·		🗆 Add
			Remove
			Add Remove

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effective date must be specific, c date this document is filed by the	annot be prior to date of receipt or filed date and cannot be more than 90 days after
effective date must be specific, c	annot be prior to date of receipt or filed date and cannot be more than 90 days after e Florida Department of State) , 2014 , Wilbert Hosso
effective date must be specific, c date this document is filed by the	annot be prior to date of receipt or filed date and cannot be more than 90 days after

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Filing Fee: \$25.00