

L12000124853

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

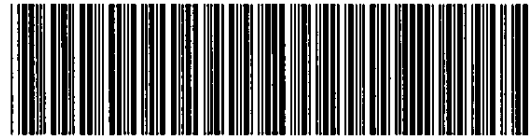
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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14 AUG 21 12 14 40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AUG 22 2014

S. YOUNG

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GLOBAL EMPIRE ATTITUDE RADIO, 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:

J.T. BURN II
Name of Person

GLOBAL EMPIRE ATTITUDE RADIO, LLC
Firm/Company

6105 MEMORIAL HWY SUITE A-9
Address

TAMPA, FL 33516
City/State and Zip Code

gearradio@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

J.T. BURN II at (813) 455 4106
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee & Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | <input type="checkbox"/> \$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

FILED
14 AUG 21 09 49
TALLAHASSEE, FL
SECRETARY OF STATE

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

GLOBAL EMPIRE ATTITUDE RADIO, 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 Company were filed on OCT 2012 and assigned Florida document number _____.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

GLOBAL EMPIRE ATTITUDE REVOLUTION RADIO, LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

6105 MEMORIAL HWY
SUITE A-9
TAMPA FL 33516

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

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 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.

If Changing Registered Agent, Signature of New Registered Agent

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

MGR = Manager
AMBR = Authorized Member

| <u>Title</u> | <u>Name</u> | <u>Address</u> | <u>Type of Action</u> |
|--------------|---------------------|-------------------|---|
| MGR | MICHELLE BILLINGTON | 6105 MEMORIAL HWY | <input checked="" type="checkbox"/> Add |
| | | SUITE A-9 | <input type="checkbox"/> Remove |
| | | TAMPA FL 33615 | |
| | | | <input type="checkbox"/> Add |
| | | | <input type="checkbox"/> Remove |
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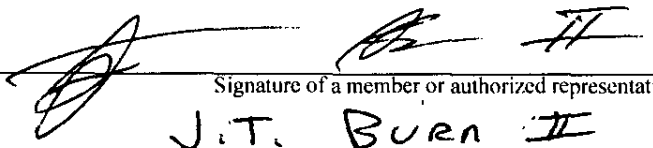
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FALLAUX, J. (080)

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated JULY 25 ~~#~~, 2014.



Signature of a member or authorized representative of a member
J. T. Burn II

Typed or printed name of signee

FILED
14 AUG 21 AM 4:49
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TALLAHASSEE, FLORIDA