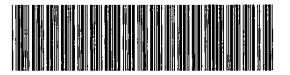
## L12000/26852

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
·						
Special Instructions to Filing Officer:						
·						

Office Use Only



400240335874

10/23/12--01029--001 \*\*25.00

2112 RCT 23 PM 12: 49
SECRETARY OF STATE
ANASSET, FLORIDA

T. CLINE
OCT 24 2012
EXAMINER

## **COVER LETTER**

Division of C	orporations					
	Masad	a Media, LLC				
SUBJECT:	Name of Lim	ited Liability Company				
The enclosed Articles of	of Amendment and fee(s) are sul	omitted for filing.				
Please return all corres	pondence concerning this matter	to the following:				
	E	mmanuele Zuccarelli				
		Name of Person				
	1	Masada Media, LLC				
		Firm/Company				
		21657 Sutters Ln				
		Address				
Boca Raton, FL 33428			1 (1) 1 (2) 1 (2)	<u> </u>		
		City/State and Zip Code		至高	ECT	3) , 1
	manı	nyzuccarelli@gmail.con	n .	SS A	83	5
For further information	E-mail address: (	to be used for future annual report i	iotification)	EE FLER	₹H :2: 149	*
Emma	nuele Zuccarelli	at (_561_)	4002323	53	5,	
Name	of Person	Area Code & Day	ytime Telephone Numbe	r		
Enclosed is a check for	the following amount:					
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclo	osed) Certified	ite of Status		i)
MAI	II INC ADDDESS.	STDF ET/COI	UDIED ANNDESS.			

MAILING ADDRESS:

TO: . Registration Section

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

## Masada Media, LLC

(Name of the Limited Liability Comp (A Florida Limited	any as it now appears on o	ur records.)		
The Articles of Organization for this Limited Liability Compan L12000126852  Florida document number	1	0/4/2012	and assigned	
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited lia	bility company here:			
The new name must be distinguishable and end with the words "Lin"L.L.C."  Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)		AS OLAS		
Enter new mailing address, if applicable:	1314 E. LA	s olas ē	15 E	
(Mailing address MAY BE A POST OFFICE BOX)	SOITE 532 FORT LAUNEUDA		530	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address he Name of New Registered Agent:	office address on our re	-	e name of the ne	
New Registered Office Address:	Entar El	orida street addr	788	
	Enter Florida street address			
	City	, Florida	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 amending 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 = Manager

MGRM = Managing Member Name | Address Type of Action Title MGR Mindell, Yaniv 1413 SW 156th Way Pembroke Pines, FL 33027 MGR Zuccarelli, Emmanuelle 1413 SW 156th Way Pemboke Pines, FL 33027 MGRM Masada Media Partners E LAS OLAS BUX D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Please remove the 2 individuals names, and add Masada Media Partners as the Manager/Member detail for the company. Thank you, PIEASE AISO CHANGE THE PRINCIPAL AND MAILING ADDRESS TO THE ADDRESS LISTED UNDER SECTION A. 2012 Dated DGOBER 22 Signature of a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00