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COVER LETTER

TO: Registration Se Division of Cor			· ,	
SUBJECT: Mer	cado Ecua L	LC		
	Name of Limit	ed Liability Company	· · · · · · · · · · · · · · · · · · ·	
,			72	
	9333 SW	227th St U	nit 6	and to
		TL 33190 City/State and Zip Code Vin Q gmail, (wood obe used for future annual report no	#10 co 1	
For further information of	oncerning this matter, please c	all:		
Kandy Ja	rin	at (212) 961 71 Area Code & Dayti	93	
Name o	f Person	Area Code & Dayti	me Telephone Number	
Enclosed is a check for t	he following amount:			
□ \$25.00 Filing Fee	□\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy	\$\$60.00 Filing Fee, Certificate of Status &	

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

(additional copy is enclosed)

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Mercudo ECUA LLC	-	
(Name of the Limited Liability (A Florida	y Company as it now appears on our records.) Limited Liability Company)	
The Articles of Organization for this Limited Liability C	Company were filed on 1120 2012	and assigned
Florida document number <u>L12000146 58</u>		
This amendment is submitted to amend the following:	·	
A. If amending name, enter the new name of the lim	nited liability company here:	i.
Jarrin Media LLC		
The new name must be distinguishable and end with the wo 'L.L.C."	ords "Limited Liability Company," the designation	
		2913
Enter new principal offices address, if applicable:		30 1 28 100
(Principal office address MUST BE A STREET ADD)	RESS)	Statement of the statem
	· .	00 XX
		F. S
Enter new mailing address, if applicable:		<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or regis	stered office address on our records, ent	er the name of the new
registered agent and/or the new registered office add	<u>lress here</u> :	
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 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 = N	Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
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amending any other i	nformation, ent	ter change(s) here: (Attach addi	tional sheets, if necessary.)	
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November	13th	, 2013		
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	\sim .	a member or authorized representation		
	U	Typed or printed name of signer Page 3 of 3	e	
		Filing Fee: \$25.00	>. 	2013 NO\$
			(n) 507- 111-	8
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