

L12000148441

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

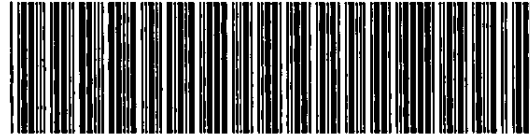
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2012 DEC - 3 PM 1:23

FILED

L12-148441

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: THRIVE NOW MEDIA LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Articles of Correction and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ROBERT ACEVEDO

Name of Person

FREEDOMTAX ACCOUNTING

Firm/Company

1016 E OSCEOLA PKWY

Address

KISSIMMEE FL 34744

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ROBERT ACEVEDO

Name of Person

at (**407**) **344-1012**

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

- \$25 Filing Fee
- \$30 Filing Fee & Certificate of Status
- \$55 Filing Fee & Certified Copy
- \$60 Filing Fee, Certificate of Status & Certified Copy

CR2E062 (08/05)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
2012 DEC -3 PM 1:23

FILED

**ARTICLES OF CORRECTION
FOR
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

Pursuant to section 608.4115, F.S., this document is being submitted **within the required 30 business days** to correct the **attached** articles of organization or application to transact business in Florida.

FIRST: The name of the limited liability company is:
THRIVE NOW MEDIA LLC

SECOND: The articles of organization or the application to transact business

(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)

- Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:

THE EFFECTIVE DATE OF THE LLC SHOULD BE 1/1/2013.
PLEASE ALSO ADD MERRIE RAE KARIMOV AS A
MGRM TO THE MANAGER/MEMBER DETAIL.

OR

- Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

Dated: NOVEMBER 28TH, 2012.

Sandy Myers

Signature of a member or authorized representative of a member

SANDY MYERS

Typed or printed name of signee

Filing Fee: \$25.00
Certified Copy: \$30.00 (optional)

**Electronic Articles of Organization
For
Florida Limited Liability Company**

L12000148441
FILED 8:00 AM
November 27, 2012
Sec. Of State
clewis

Article I

The name of the Limited Liability Company is:

THRIVE NOW MEDIA LLC

Article II

The street address of the principal office of the Limited Liability Company is:

14662 BLACK CHERRY TRAIL
WINTER GARDEN, FL. US 34787

The mailing address of the Limited Liability Company is:

14662 BLACK CHERRY TRAIL
WINTER GARDEN, FL. US 34787

Article III

The purpose for which this Limited Liability Company is organized is:

ANY AND ALL LAWFUL BUSINESS.

Article IV

The name and Florida street address of the registered agent is:

SANDY MYERS
14662 BLACK CHERRY TRAIL
WINTER GARDEN, FL. 34787

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature: SANDY MYERS

Article V

The name and address of managing members/managers are:

Title: MGRM
SANDY MYERS
14662 BLACK CHERRY TRAIL
WINTER GARDEN, FL. 34787 US

L12000148441
FILED 8:00 AM
November 27, 2012
Sec. Of State
clewis

Article VI

The effective date for this Limited Liability Company shall be:

11/27/2012

Signature of member or an authorized representative of a member

Electronic Signature: SANDY MYERS

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.