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| Certified Copies        | _ Certificates     | of Status |
| Special Instructions to | Filing Officer:    |           |
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**EXAMINER** 

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ECHETARY OF STATES.
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19/18/11

### **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

407

344-1012

MAILING ADDRESS:

Division of Corporations

Tallahassee, Florida 32314

Registration Section

P.O. Box 6327

Name of Person

Area Code & Daytime Telephone Number

### STREET/COURIER ADDRESS:

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

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)

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

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

| <u>FIRST</u> | The name of the limited liability company is:  |      |
|--------------|--|------|
| SECO         | ND: The articles of organization or the application to transact business   |      |
| <u>(CH</u>   | ECK 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   | 3.   |
|              | PLEASE ALSO ADD MERRIE RAE KARIMOV AS A  | _    |
|              | MGRM TO THE MANAGER/MEMBER DETAIL.   |      |
|              | OR DESCRIPTION OF THE PROPERTY | 16   |
|              | Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:   | 1777 |
|              |  | •    |
|              |  |      |
|              | — C.)  |      |
| Dated:       | NOVEMBER 28TH , 2012 .   |      |
|              | Sandy Myers  |      |
|              | Signature of 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

### 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.

à Bija