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TO: Registration_Section Division of Corporations * Ladwig Consulting, LLC SUBJECT: 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: Whitney Lee Ladwig Name of Person Ladwig Consulting, LLC Firm/Company 4033 Lauren Court Address Destin, Florida 32541 City/State and Zip Code whitneyplee@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Whitney Lee Ladwig Daytime Telephone Number Name of Person Enclosed is a check for the following amount: □ \$25.00 Filing Fee ■ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy 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 ORGANIZATION OF

Ladwig Consuming, LLX	
(<u>Name of the Limited Liabili</u> (A Florid	ity Company as it now appears on our records.; a Limited Liability Company)
The Articles of Organization for this Limited Liability C	Company were filed on February 15, 2013 and assigned
This amendment is submitted to amend the following:	
_	
A. If amending name, enter the new name of the lim	nited hability company here:
LEE INTEGRATED MARKETING, LLC	
The new name must be distinguishable and contain the words "Lin	nited 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 ADDI	RESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or regi	stered office address on our records, enter the name of the new
registered agent and/or the new registered office add	
Name of New Registered Agenz:	
Name Designated Office Address.	
New Registered Office Address:	Enter Florida street address
	m
	, Florida City Zip Code
New Registered Agent's Signature, if changing Registers	ed Agent:
provisions of all statutes relative to the proper and c accept the obligations of my position as registered a being filed to merely reflect a change in the register	and agree to act in this capacity. I further agree to comply with the complete performance of my duties, and I am familiar with and agent as provided for in Chapter 605, F.S. Or, if this document is red office address, I hereby confirm that the limited liability
company has been notified in writing of this change	ASSET L
	If Changing Registered Agent, Signature of New Registered Agent
	it Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
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ffective date, if other than the an effective date is listed, the date motors: If the date inserted in this locument's effective date on the effective date on the free record specifies a delayer. The 90th day after the records	ne date of filing: _ nust be specific and can block does not mee Department of State ed effective dat	nnot be prior to d it the applicable e's records.	statutory filing r	than 90 days equirements,	this date v	vill not be	e listed a
March 1	_	2016					
	Signature of a men	itney Rec	Ladwig		- (-)		Π
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	Signature of a mer	nbe or authorize	d representative of	a member	30.54	۳° د ت	NAMES OF TAXABLE PARTY.
Whitney Lee Ladwig	Signature of a mer	nbe or authorize	d representative of	a member	TARY YRATE	#	M Party
Whitney Lee Ladwig		nbe or authorize		a member	VRY OF		
Whitney Lee Ladwig				a member	NRY OF STA	_ [M Party

Filing Fee: \$25.00