L13000046271

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SECRETARY OF STATE

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COVER LETTER .

TO: Registration So Division of Cor			
SUBJECT: Se	o Metate I 6	L.C.	
SUBJECT: SC	O DISTITLE, L Name of Limin	ed Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ondence concerning this matter:	to the following:	
	Ryan	Paul Name of Person	
	,	Name of Person	
	SEO B	tStrct, LLC Firm/Company	
		Firm/Company	
	24/8 Cho	intilly Ave	
		Address	
	Winter Par	City/State and Zip Code USfrict Degmail. Cobb parable Cobb wast for future annual report actificant	
		0. (
	ryanseoc	WSFILE By g mailic o be ward for fitture annual report notificati	Out
For fürther information c	oncerning this matter, please ca	all:	
Ryan F	au (407, 928-98	49
Name o	ſ Person	at (407) 928-98 Area Code & Daytime Te	elephone Number
Tinclosed is a check-for-th	ne following amount:		
□ \$25.00 Filing Fee	14\$30.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	US60.00 Filing Fee, Certificate of Status & Certified Copy

MAILING ADDRESS: Magazination 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

(additional copy is enclosed)

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

Seo District, LLC
(Name of the Lindled Liability Company, as it non appears on our records.)
(A Florida Limited Flaming Company)

Name of the Limited	Liability Compar Florida Limited L	N as il don abbent.	og our records.)	·
The Articles of Organization for this Limited Li Florida document number L13000046		were filed on 3	28 (13	DIMESION OF ASSET OF
This amendment is submitted to amend the following				S PH S
A. If amending name, enter the new name of AY PE Marketing, I. The new name must be distinguishable and end with				65:58
The new name must be distinguishable and end wit "L.L.C."	h the words "Limi	ted Liability Compa	ny," the designation "I	LLC" or the abbreviation
Enter new principal offices address, if applica-	uble:			
(Principal office address MUST BE A STREE	T.ADDRESSi	2418 ch Winter	entilly Ave Park, FL	32789
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE	<u>BOX)</u>			
B. If amending the registered agent and/or the new registered of	Tice address her	e:		
Name of New Registered Agent:	Ryan	Paul		ress 32789 Zip Code
New Registered Office Address:	2418 (Chantilly For	Aul er Florida street add	rave
			er Frontau sireer aaa	resa
	Winter	Park	, Flecida	32789
				Ligr Cride
New Registered Agent's Signature, if changing I	Registered Agent:			
I hereby accept the appointment as registere	d agent and agr	ee to act in this ca	pacity. I further as	ree to comply with

t nevery accept the appointment as registered agent and agree to act in this capacity, i juriner 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 Changing Registered Agent, Signature of New Registered Agent

V amending or Managin	the Managers or Managing Members <u>g Member being added or removed fron</u>	on our records, <u>enter the title, name, and addre</u> n our records:	ss of each Manager
: • MGR = Mai • MGRM = M	nager Ianaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Jonathan James-Hon	520 N. Orlando Ave unA Winter Park, FC 32789	46 Add
		Winter Park, FL 32789	Remove
NAKS OSOG			
TO TOTAL			
			
			SECRETARY OF Remove
			1. 9: 59
			Add
			Remove
			Add
			Remove
			Add
			Remove

· Mamending any other	information, enter change(s) here: (Attach additional sheets, if necessary.)
maybe game a memora of the months of the self-in-	
ed <u>9/3/13</u>	
-1- 1	
	Signature of a member or authorized representative of a member
	O D
	Ryan Paul Typed or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00

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