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SECRETARY OF STATE

AND ANASSEE, FLORIDA

K.SALY EXAMINER AUG - 9 2013

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: BIG SPROUT MEDIA LLC 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:	
Kelly Hanna Name of Person	
BIGSPROUT MEDIA CCC Firm/Company	
327 RIV ERSIDE DRIVE Address	
Palm Beach Gardens F2334.10 City/State and Zip Code Bootlehou @ bollsouth. net E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Kelly Lanna at (561) 236-9208 Name of Person at (561) 236-9208 Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount:	
□ \$25.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) □ \$55.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)	

MAILING ADDRESS:

Registration 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

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

FILED

BIGSPROUT	MEDIA LLC	13 AUG -8 PM 3: 45
(<u>Name of the Limited Lia</u> (A Flo	bility Company as it now appears on our rorida Limited Liability Company)	ccords. LLAHASSEE, FLORIDAL
The Articles of Organization for this Limited Liabil Florida document number <u>L13000048</u>		
This amendment is submitted to amend the following	ng:	
A. If amending name, enter the new name of the	e limited liability company here:	
The new name must be distinguishable and end with th		
The new name must be distinguishable and end with th L.L.C."	e words "Limited Liability Company," the de	signation "LLC" or the abbreviation
Enter new principal offices address, if applicable	e: <u>N/A</u>	
Principal office address MUST BE A STREET A		
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BO.	_ N/A	
B. If amending the registered agent and/or registered agent and/or the new registered office		ds, enter the name of the new
Name of New Registered Agent:	NA	
New Registered Office Address:	Enter Florid	la street address
		Florida
-	City	FloridaZip Code
New Registered Agent's Signature, if changing Regi	istered Agent:	
I haraby account the appointment as registered a	goent and garee to act in this capacity. I	further goree to comply with

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 Changing Registered Agent, Signature of New Registered Agent

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 = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	EDWARD CARR	327 RIVERSIDE DRIVE	Add
		Palm Beach Gardens FL 32	Remove
MGRM	Kelly Hanna	327 RIVERSIDE DRIVE	Add
		Palm Beach Gardens FL 3	3416 Remove
			
			Add
		·	Remove
			
			Add
			Remove
			Add
			Remove
			Add
			Remove
			

D. If a	amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
•	
	• • •
Dated .	03-04-13
	Kell He
	Signature of a member or authorized representative of a member
	Kemillanna Eoward Cara
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00