

L13000058684

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

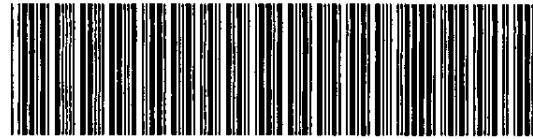
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: Change the World 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:

**Jill DiSalvo**

Name of Person

**DiSalvo & Associates, PA**

Firm/Company

**1760 N. Jog Road, Suite 150**

Address

**West Palm Beach, FL 33411**

City/State and Zip Code

**jdisalvo@d-acpa.com**

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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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For further information concerning this matter, please call:

**Jill DiSalvo**

**561 659-1177**

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- \$25.00 Filing Fee
- \$30.00 Filing Fee & Certificate of Status
- \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$60.00 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



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>	<u>Address</u>	<u>Type of Action</u>
MGRM	Tamara Lowe	713 Cote Azure Dr	<input checked="" type="checkbox"/> Add
		Palm Beach Gardens, FL	<input type="checkbox"/> Remove
		33410	
MGRM	Phillip Shrantz	713 Cote Azure Dr	<input checked="" type="checkbox"/> Add
		Palm Beach Gardens, FL	<input type="checkbox"/> Remove
		33410	
			<input type="checkbox"/> Add
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

N/A

Dated June 3, 2013



*Philip [Signature]*

Signature of a member or authorized representative of a member

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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TALLAHASSEE, FLORIDA

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