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SECRETARY OF STATE

FEB O 2 2016

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Ericka Deliemé Publishing & Media Productions, L 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:
Ericka Deliané Name of Person
Kingdom Way Works, LLC
3415 E. Jean Street
Tampa, FL 3360 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Kricka Delismé at (813) 504-790 Area Code Daytime Telephone Number 1
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee Certificate of Status 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Articles of Organization for this Limited Liability Company were filed on Nov 20, 2013 and assigned Florida document number <u>L</u>137 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words /Limited 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 ADDRESS) N/A Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Æ New Registered Agent's Signature, if changing Registered Agent:

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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = M $AMBR = A$	Janager Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
N/A	NA	NIA	
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tive date, if other the fective date is listed, the case inserted in the date inserted in the date of	date must be specific a this block does no	and cannot be pri of meet the appl	icable statutory fi		(optional ys after filing	3.) Pursua	
cord specifies a de 90th day after th			ot an effective	e time, at 12	!:01 a.m.	on the	e earli
January	1241	2016	<u>) </u>				
	Ex.	Jel	(m)	Q			
	Signature-of	a member or aut	horized representat	ive of a member			

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Filing Fee: \$25.00