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COVER LETTER

TO: Registration Se Division of Cor				
SUBJECT: De		DIA LLC 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:		
	HAYOEI	V GREEN Name of Person		
	DESTI	N MEDIA Firm/Company	<u>UC</u>	
	112 5	AMESTOWN Address	AVE. P. S. S.	
	FORTWALT	ON BEACH, F	-L 325%	
	HAYDEN @ E-mail address: (t	DESTINME o be used for future annual report no	DIA. COM S	÷
For further information of	oncerning this matter, please c	ail:	Tim	
HAYDEN Name o	GREEN f Person	at (850) 642 Area Code & Dayt	-8409 ime Telephone Number	
Enclosed is a check for the	he following amount:			
\$25.00 Filing Fee	□\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy	□\$60.00 Filing Fee, Certificate of Status &	

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

(additional copy is enclosed)

Certified Copy

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

DESTIN M	EDIA LLC	
(Name of the Limited Liability (A Florida	ty Company as it now appears on our Limited Liability Company)	records,)
The Articles of Organization for this Limited Liability Florida document number <u>L1300089</u>	Company were filed on <u>6/20</u> <u>6</u> 27	2/13 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	
The new name must be distinguishable and end with the work.L.L.C."	ords "Limited Liability Company," the d	lesignation "LLC" of the abbreviation
Enter new principal offices address, if applicable:	 	No. of the second secon
Principal office address MUST BE A STREET ADD	RESS)	(4) (3) (4) (4) (4) (5) (4) (5)
	···	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
3. If amending the registered agent and/or regi		rds, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florid	da street address
	O't-	, Florida
	City	Zip Code

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 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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	JULIE GREEN	112 JAMESTOWN AVE	Add
		FORT WALTON BEACH, FL	Remove
		32547	_
			Add
			Remove
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Filing Fee: \$25.00

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