2/3000119066

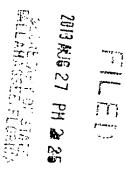
| (Re | equestor's Name) | | | |
|-----------------------------------------|--------------------|-----------|--|--|
| | | | | |
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| | | | | |
| (Ac | ldress) | | | |
| (Ci | ty/State/Zip/Phone | #) | | |
| PICK-UP | ☐ WAIT | MAIL. | | |
| (Business Entity Name) | | | | |
| | | | | |
| (Document Number) | | | | |
| Certified Copies | _ Certificates | of Status | | |
| Special Instructions to Filing Officer: | | | | |
| | | | | |
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| 'AUG 2 9 2013 | | | | |
| | A. LUNT | | | |
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Office Use Only



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COVER LETTER

| TO: Registration Section Division of Corpo | | |
|--------------------------------------------|--------------------------------------------------------------------|----------------------|
| SUBJECT: Mega | Ads LL C | |
| | Name of Limited Liability Company | _ |
| The enclosed Articles of Ar | mendment and fee(s) are submitted for filing. | |
| Please return all correspond | lence concerning this matter to the following: | |
| | Ewa Rzadzka | |
| | Name of Person | |
| | Firm/Company | |
| | 240 Promenade dr. Apt 203 | |
| | Address | 2013 |
| | Dunedin, FL 34698 | 2019 &UG 27 |
| | City/State and Zip Code revepol@hotmail.com | [*] **. |
| | E-mail address: (to be used for future annual report notification) | |
| For further information con | cerning this matter, please call: | က် (၂) ရှိ |
| Ewa Rzadzk | a 813,802-7669 | · |

Enclosed is a check for the following amount:

Name of Person

□ \$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:

Area Code & Daytime Telephone Number

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| Mega Ads LLC | I I iohilitu Co | mnony of it now ennears on o | ur moords) |
|--------------------------------------------------------------------------------------|-----------------|--------------------------------------------------------|------------------------------------------|
| (Name of the Eximet | A Florida Limi | mpany as it now appears on o ted Liability Company) | ar records.) |
| The Articles of Organization for this Limited L Florida document number L13000119066 | iability Com | pany were filed on 08.22.2 | 013 and assigned |
| This amendment is submitted to amend the following | lowing: | | |
| A. If amending name, enter the new name o | f the limited | liability company here: | |
| Mega Ads Usa LLC | | | • |
| The new name must be distinguishable and end wi "L.L.C." | th the words " | Limited Liability Company," th | ne designation "LLC" or the abbreviation |
| Enter new principal offices address, if applic | cable: | same | |
| (Principal office address MUST BE A STREI | ET ADDRES | <u>(S)</u> | <u> </u> |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE | BOX) | same | 2013 AL 6 2 |
| B. If amending the registered agent and registered agent and/or the new registered o | or registere | d office address on our re | |
| Name of New Registered Agent: | n/a | | |
| New Registered Office Address: | | Enter Flo | orida street address |
| | | | , 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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member **Type of Action Title** <u>Name</u> Address Add Remove Add Remove 2013 Add 2 Remove PM Add Remove Add Remove Add Remove

| If amending any other inform | ation, enter change(s) here: (Attach additional sheets, if necessary.) |
|------------------------------|------------------------------------------------------------------------|
| <u> </u> | |
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| - | |
| | |
| August 22 | 2013 |
| August 23 | 2013 |
| | Sycolop |
| Si | gnature of a member or authorized representative of a member |
| Ewa Rzadzka | |
| | Typed or printed name of signee |

Page 3 of 3

Filing Fee: \$25.00