#L13000124350

(R	equestor's Name)	
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(C	ity/State/Zip/Phone #	/)
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SEUNETARY OF STATE
TAIL MIASSEE, FLORIDA

K.SALY EXAMINER SEP 1 0 2013

COVER LETTER

TO: Registration Section
Division of Corporations

Politics After 5 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:

Joseph Culotta

Name of Persor

Politics After 5 LLC

Firm/Company

7922 Elmstone Cir

Address

Orlando, FL 32822

City/State and Zip Code

joe@joeculotta.com

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

For further information concerning this matter, please call:

Joseph Culotta

_{at} 407 412-8222

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

13 SEP -6 PM 3: 06

SECRETARY OF STATE

ALLAHASSEE FLORIE

Politics After 5 LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company	were filed on 9/3/2013	_ and assigned
Florida document number L13000124350		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	lity company here:	
The new name must be distinguishable and end with the words "Limite "L.L.C."	ed Liability Company," the designation "LLC	" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		 _
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here	· · · · · · · · · · · · · · · · · · ·	name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addres	5
	, Florida	
	City	Zip Code
No. 10 and a second of the sec		

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 = ManagerMGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Joseph Culotta	7922 Elmstone Cir	Add
		Orlando, FL 32822	Remove
			Add
			Remove
			Add
			Add
			Add
			Remove
			Add
			Add
			Remove

n am	Please add the company EIN # to the company's record: 46-3562413
	Troube ded the company Environmenty of record. 40 cooper to
ted	9/4/13
	Oh for
	Signature of a member or authorized representative of a member
	Joseph Culotta
	Typed or printed name of signee

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Filing Fee: \$25.00