

L13000138387

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

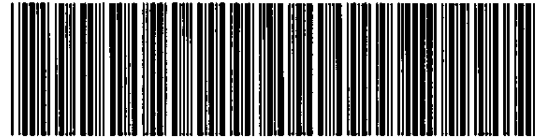
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

JAN 13 2014
D. BAKER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **Jackson Sabol 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 S. Sabol

Name of Person

Tristar Media Group LLC

Firm/Company

401 E. Jackson Street, Ste 2340

Address

Tampa, FL 33602

City/State and Zip Code

sabolesq@tristarfilmfinance.com

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

For further information concerning this matter, please call:

Cristopher Sabol

Name of Person

at **(323) 3831155**

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|---|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input checked="" type="checkbox"/> \$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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Jackson Sabol 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 30 September 2013 and assigned
Florida document number L13000138387

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Tristar Media Global LLC

The new name must be distinguishable and end with 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)

401 E. Jackson Street

Ste. 2340

Tampa, FL 33602

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

(same)

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:

Jill Sabol

New Registered Office Address:

401 E. Jackson Street, Ste. 2340

Enter Florida street address

Tampa

Florida 33602

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.

Jill Sabol
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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Michael Olsen	2556 Lawson Ave.	<input checked="" type="checkbox"/> Add
		West Vancouver, B.C.	<input type="checkbox"/> Remove
		Canada V7V 2E9	
		n/a	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		n/a	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		n/a	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		n/a	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		n/a	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		n/a	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

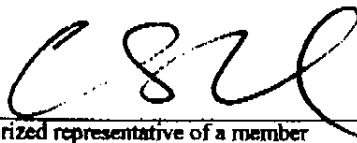
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JANUARY OF STATE
ALABAMA
CLERK OF COURT
JANUARY OF STATE
ALABAMA

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

n/a

Dated 10 January, 2014



Signature of a member or authorized representative of a member

Cristopher G. Sabol

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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