L14000012680

(Re	equestor's Name)	
(Ad	idress)	
(Ac	idress)	<u></u>
(Ći	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL MAIL
(Bu	usiness Entity Na	me)
(Do	ocument Number)
Certified Copies	_ Certificate	es of Status
Special Instructions to	Filing Officer:	

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B. BOSTICK SEP **1 8 2014**

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COVER LETTER

Registration Section Division of Corporations

۸Ó:

SUBJECT: E.T.A Med	lia Connect L.L.C		
***	Name of Lin	mited Liability Company	
The enclosed Articles of	Amendment and fee(s) are su	bmitted for filing.	
Please return all correspo	ondence concerning this matte	er to the following:	
	Crystal Clevela		
		Name of Person	
	Exclusive Vision		
		Firm/Company	
	3539 Apalachee Par	rkway Suite 3 Unit 401	
		Address	
	Tallahassee, FL		
		City/State and Zip Code	
	visionsexclusiv	e@gmail.com	
	E-mail address:	(to be used for future annual report notif	ication) 6
For further information c	concerning this matter, please	call:	୍ୟୁ : ଜୁଲ୍ଲ ଅନ
			QE N
	Crystal Cleveland of Person	at (586) Area Code Daytime	260-3622
		•	•
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 (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
			(additional copy is encrosed)

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

E.T.A Media Connect L.L.					_	
(Name of the Limit	records.) (A Florida	ny as it now appears on our Limited Liability Company)				
The Articles of Organization for this Limited L	iability Company	were filed on <u>01/23/2014</u>		and a	issigne	d
Florida document number L14000012680						
This amendment is submitted to amend the fol	lowing:					
A. If amending name, enter the new name o	f the limited liab	oility company here:				
Exclusive Visions L.L.C.						
The new name must be distinguishable and end with the	words "Limited Liab	ility Company," the designation "	LLC" or the a	abbreviation	ı "L.L.C	,
Enter new principal offices address, if appli	cable:	3539 Apalachee Parkwa	y Suite 3 L	init 401		
(Principal office address MUST BE A STRE	<u>ET ADDRESS)</u>	Tallahassee, FL 32311				
					CD [2]	
Enter new mailing address, if applicable:	•	3539 Apalachee Parkwa	y Suite 3 L	Init 401		
Mailing address MAY BE A POST OFFICE	BOX	Tallahassee, FL 32311			<u>ය</u>	
				از.	######################################	Teach 1
					r _i or	
B. If amending the registered agent and/or i	O	•	nter the na	me of the	<u>new</u>	
registered agent and/or the new registered of	ilice address he	<u>re</u> :				
Name of New Registered Agent:		<u>:</u>		- 		
New Registered Office Address:	1095 Winter L	.n				
		Enter Florida street ad	dress			
	Tallahass		, Florid <u>a</u>			<u>-</u>
		City		Zip Cod	le	_ _

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 the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
CEO	Earnest T. Anderson	2522 Ellsworth Street	Add
		Philadelphia, PA 19146	⊠ Remove
CFO	Kevin Adams	740 M.L King Blvd	
		Chattanooga, TN 37403	⊠ Remove
<u> </u>	Crystal Cleveland	1095 Winter In Tallahassee, Fl 32311	Add Add Remove
<u>Sec</u>	Crystal Cleveland	1095 Winter In Tallahassee, F1 32311	Add Remove
<u>CEO</u>	Stanley WAIKER, JR	1095 Winter In Tallaharel, El 37311	Add SS P Remove OSD 25
President	Stanley WAlter, JR	1895 Winter In Tallahassee, 8 37311	Add Remove

•	
ective date must b	ter than the date of filing: (optional) be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days ment is filed by the Florida Department of State)
fective date must be he date this docum	be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days
fective date must b	be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days ment is filed by the Florida Department of State)

Page 3 of 3

Filing Fee: \$25.00

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September 16, 2014

CRYSTAL CLEVELAND **EXCLUSIVE VISIONS** 3539 APALACHEE PARKWAY SUITE 3, UNIT 401 TALLAHASSEE, FL 32311

SUBJECT: E.T.A MEDIA CONNECT L.L.C

Ref. Number: L14000012680

We have received your document for E.T.A MEDIA CONNECT L.L.C and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

The effective date must be specific and cannot be prior to the date of filing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 314A00019803

Barbara Bostick Regulatory Specialist II