

U400090239

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

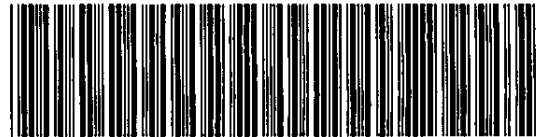
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



900292139089

12/06/16--01011--014 \*\*25.00

FILED

2016 DEC -6 A 10:13

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

S Warren

DEC 07 2016

From: Sheena Aubut  
535 Central Avenue NE Suite 411  
St Petersburg, FL 33701  
11/30/2016

To: The Florida Department of State

Hello My name is Sheena Aubut and I am the owner/manager of The Hybrid Advertising Group, LLC I would like to update the principal address to 535 Central Avenue NE Suite 411 St Petersburg, FL 33701 I would also like to update the mailing address to reflect 535 Central Avenue NE Suite 411 St Petersburg, FL 33701

I am also updating the address for myself as manager (MGR) to reflect the new address 535 Central Avenue NE Suite 411 St Petersburg, FL 33701 and removing the other operating manager (MGR) Michael Ortegon

I can be reached at 727-592-4895 or via email at [sheena@thehybridadgroup.com](mailto:sheena@thehybridadgroup.com)

Kind Regards,

Sheena Aubut

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: The Hybrid Advertising Group, 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:

Sheena Aubut

Name of Person

The Hybrid Advertising Group

Firm/Company

535 Central Ave N Ste. 411

Address

St. Petersburg, FL 33701

City/State and Zip Code

Sheena@thehybridadgroup.com

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

For further information concerning this matter, please call:

Sheena Aubut

Name of Person

at (727) 623-7184 or 727-592-4895

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**

The Hybrid Advertising Group, 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 May 29th, 2014 and assigned Florida document number L14000090239

This amendment is submitted to amend the following:

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

The new name must be distinguishable and contain 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)**

535 Central Avenue N.  
Ste 411  
St. Petersburg, FL 33701

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

535 Central Avenue N.  
Ste. 411  
St. Petersburg, FL 33701

**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:

New Registered Office Address:

Enter Florida 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 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**

FILED  
CLERK OF  
STATE  
FLORIDA  
JUN 13 2014

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager  
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Sheena Aubut	535 Central Ave N	<input type="checkbox"/> Add
		Ste. 411	<input type="checkbox"/> Remove
		St. Petersburg, FL 33701	<input checked="" type="checkbox"/> Change
MGR	Michael Ortegon	8955 US Hwy 301 North	<input type="checkbox"/> Add
		Ste 205 Parrish, FL	<input checked="" type="checkbox"/> Remove
		34219	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

2013 DEC - 6 A 10:13  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
**FILED**  
☐ Change  
☐ Add  
☐ Remove  
☐ Change

[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b).

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

11/30/2016

Sheena Juch

Typed or printed name of signee

2016 DEC -6 A 10:13  
SECRETARY OF STATE  
EMBASSY OF FLORIDA

FILED