5/3/2019

Division of Corporations

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To:			
	Division of Cor	rporations	<u></u> ;
	Fax Number	: (850)617-6383	-

From:			
	Account Name	: CORPORATE CREATIONS INTERNATIONAL	IŅÇ.
	Account Number	: 110432003053	
	Phone	: (561)694-8107	i m .,
	Fax Number	: (561)694-1639	- '' '
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annual	report mailings.	Enter only one email address please	, * *
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-ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2019 HAY - 3 H 9: 04

Zip Code

UNITEA, LLC		
(Name of the Limited Liability (A Florida	ty Company as it now appears on our records.) a Limited Liability Company)	77. 2
The Articles of Organization for this Limited Liability C	Company were filed on 06/25/2014	and assigned
Florida document number 1.14000101862		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
JOOX, LLC		
The new name must be distinguishable and contain the words "Lim	ited Liability Company," the designation "LLC" or th	e abbreviation "L L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDR	RESS)	
	imited Liability Company were filed on 06/25/2014 and assigned 662 deep following: In name of the limited liability company berg: Intain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L L.C." If applicable: I STREET ADDRESS) able: OFFICE BOX) ent and/or registered office address on our records, enter the name of the new stered office address here: ent:	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		ter the name of the ne
registered agent and/or the new registered office add	iresa here:	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	ı

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.

City

If Changing Registered Agent, Signature of New Registered Agent

MGR = Manager

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

AMBR = A	Authorized Member		
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			Add
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Pated _	May 3	2019				
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an effection and the second contract of the s	ctive date is listed, the date must t If the date inserted in this bloo	se specific and cannot be ik does not meet the a	prior to date of filing applicable statutory is	or more than 90 day iling requirement	s after filing.) Pursu ts, this date will no	ant to 605.02 of be listed
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