

6/16/2016

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

L 14000104758

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Account Number : I20100000011
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2016 JUN 16 PM 4:39
STATE TAX EXAMINER
FALLA HASSSEL, FLORIDA

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
W2M MEDIA LLC

Certificate of Status	1
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K. SALY
EXAMINER

JUN 17

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2016 JUN 16 AM 7:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

W2M MEDIA 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 07/01/2014 and assigned Florida document number L14000104758.

This amendment is submitted to amend the following:

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

EXATIA 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:

Enter new mailing address, if applicable:

- 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:

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 positions 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

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STATE OF FLORIDA

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

Title	Name	Address	Units	Type of Action
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Page 2 of 2

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

D. Effective date, if other than the date of filing: 06/16/16

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated: 06/16/16

Signature of a member or authorized representative of the member:

MAZING ANDRE ZANNETTI - Manager

Typed or printed name of signer

Page 2 of 2

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Affidavit

EXATIA LLC
Document L14000104748

06/16/2016

Florida Department of State

DE- Releasing the name for use to another entity

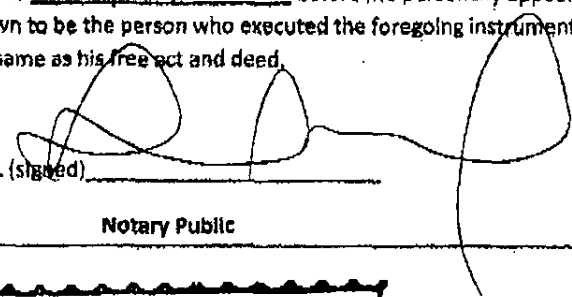
To whom it may concern,

I have no intention of reinstating, therefore, releasing the name for use to another entity.


MAZINE ANDRE ZANINETTI
Manager/Member

State of Florida - County of Stoward

On this 06/16/16 before me personally appeared Mazine Andre Zaninetti to me known to be the person who executed the foregoing instrument, and acknowledged that he executed the same as his free act and deed.

SEAL (signed) 

Notary Public

