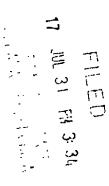
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COVER LETTER

TO: 	Registration Section Division of Corporations		
SUB,	BJECT: CBK MEDIA LLC Name of Limited Liability Company		
The e	enclosed Articles of Amendment and fee(s) are submitted for filing.		
Pleas	se return all correspondence concerning this matter to the following:		
	Kristing M Ruiz Name of Person		
	CBK MeDIA LLC Firm/Company		
	6130 SW 45th Street		
	CBKMEDIAGROUP DEMAIL com E-mail address: (to be used for future annual report notification)	17 JUL 3	F1.
For f	E-mail address: (to be used for future annual report notification) further information concerning this matter, please call:		
Kr	Name of Person at (305) 720-5247. Area Code Daytime Telephone Number	ين .	
Enclo	losed is a check for the following amount:		
5	(additional copy is enclosed) Certified C	of Status &	

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**

CBK med	O LLC
(<u>Name of the Limited Liability</u> (A Florida).	Company as it now appears on our records.) imited Liability Company)
 The Articles of Organization for this Limited Liability Cor 	npany were filed on 1 14 2015 and assigned
Florida document number <u>L15000007831</u>	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limite	ed liability company here:
The new name must be distinguishable and contain the words "Limite	d Liability Company," the designation "LLC" or the abbreviation "L.L.C."
 Enter new principal offices address, if applicable:	5838 SW 74th Ferrace
(<u>Principal office address MUST BE A STREET ADDRE</u>	(SS) #109 MIAMI, FT 33143
 Enter new mailing address, if applicable:	5838 SW 74th Ferrace
(Mailing address MAY BE A POST OFFICE BOX)	5838 SW 74th Feirace #109, Miami FL 33143
B. If amending the registered agent and/or registe	red office address on our records, enter the name of the new
registered agent and/or the new registered office addre	
	- D (-1)
1	2 ge Botill
New Registered Office Address: 58 3	Enter Florida street address
Mia	Florida 33 47, City Zip Code
New Registered Agent's Signature, if changing Registered A	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

Page 1 of 3

	from our records:	anage, enter the title, name, and address of eac	a periodi todang de
MGR = M AMBR = A	anager uthorized Member		
<u> Fitle</u>	Name	<u>Address</u>	Type of Action
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Filing Fee: \$25.00