## L15000034425

(Re	equestor's Name)	
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PICK-UP	WAIT	MAIL
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Special Instructions to	Filing Officer:	
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D. SCOTT JAN 2 4 2017

## **COVER LETTER**

Div	ision of Corpo	rations		
SUBJECT:	Silver Frame E	Books, LLC	•	
Sobsider.		Name of Lim	ited Liability Company	
The enclosed	l Articles of An	nendment and fee(s) are sub-	mitted for filing.	
Please return	all corresponde	ence concerning this matter	to the following:	
		Mario N. Brooks		
			Name of Person	<del></del>
	Firm/Company			
	1531 Jenmar Ct.			
	Address			<del></del>
		Orange Park, FL 32073		
			City/State and Zip Code	
	1	mbrooksllc@hotmail.com		
		E-mail address: (t	to be used for future annual report notification	
For further is	nformation conc	erning this matter, please ca	all:	
Mario N. Br	ooks		904 310-2561 at ( )	第 3 E
	Name of Pe	erson	Area Code Daytime Telep	ohone Number 3: 04
Enclosed is a	check for the f	ollowing amount:		er pr
□ \$25.00 F	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:

TO:

**Registration Section** 

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

Silver Frame Books, LLC		
(Name of the Limited Li (A F	ability Company as it now appears on our records.) lorida Limited Liability Company)	
The Articles of Organization for this Limited Liability	ity Company were filed on February 24, 2015	nd assigned
lorida document number L15000034425		
his amendment is submitted to amend the following	g:	
. If amending name, enter the new name of the	limited liability company here:	
Mythologem Publishing, LLC		
he new name must be distinguishable and contain the words	"Limited Liability Company," the designation "LLC" or the abbrevia	tion "L.L.C."
nter new principal offices address, if applicable	:	
Principal office address MUST BE A STREET A		
rincipal office address MUST BE A STREET A	DDRESS)	
nter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX	9	
	<u> </u>	1
		2
i. If amending the registered agent and/or r	registered office address on our records, enter the	name of the ne
egistered agent and/or the new registered office		23 元
		بسسو المسر
Name of Name Deviational Amounts		温泉し
Name of New Registered Agent:	1	<u>ω</u> ο
New Registered Office Address:		3 2
-	Enter Florida street address	
	, Florida	
<del>-</del>		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

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>	Address	Type of Action
AMBR	Annie Brooks	1531 Jenmar Ct	
		Orange Park, FL 32073	■ Remove
			☐ Change
			Remove
			Change
	<del> </del>		Add
		<del></del>	□ Remove
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ted,,	record specifies a delayed The 90th day after the reco	effective date, but not an rd is filed.	effective time, at 12:01 a.m. on t	the earlier
Signature of a member or authorized representative of a member	January 20	, 2017		
Signature of a member of authorized representative of a member	<del></del>	Mario M. Bro	oKS	
	· ·	ignature of a member of authorized	epresentative of a member	

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Filing Fee: \$25.00