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### **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: FUND MY MEDIA 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:
Sel Greenbug  Name of Person
Fund My MEd TA
101 IVY LAUR STR/
Day Jour Besch FL 32114 City/State and Zip Code
E-mail address: (to be used for Juture annual report notification)
For further information concerning this matter, please call:
Name of Person at (917) TT 1-3674  Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \$30.00 Filing Fee & \$\Bigcup \$55.00 Filing Fee & \$\Bigcup \$60.00 Filing Fee, \$\Bigcup \$Certificate of Status & \$\Bigcup \$Certified Copy (additional copy is enclosed) \$\Bigcup \$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

Fund M	1. Media LLC
(Name of the Limited I (A I	iability Company as it now appears on our records.) lorida Limited Liability Company)
The Articles of Organization for this Limited Liabi Florida document number	?√n \
This amendment is submitted to amend the following	ng:
A. If amending name, enter the new name of the	e limited liability company here:
The new name must be distinguishable and contain the words	s "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."
Enter new principal offices address, if applicable	07AT = 2
(Principal office address MUST BE A STREET A	(DDRESS)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>x)</u>
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our records, enter the name of the new
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

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 **Address Type of Action Title** <u>Name</u> Add □ Remove ☐ Change  $\square$  Add ☐ Remove ☐ Change □ Add \_□ Remove ☐ Change □ Add □ Remove ☐ Change □ Add □ Remove ☐ Change STAT © □ Remove \_□ Change

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record specifies a delay The 90th day after the rented 7-22-2	$\mathcal{A}$	authorized representative	of a member	2815 JUL 24 A II:	

Page 3 of 3

Filing Fee: \$25.00

# Certified Copy

I certify the attached is a true and correct copy of the Articles of Organization of FUND MY MEDIA, LLC, a limited liability company organized under the laws of the state of Florida, filed electronically on May 15, 2015 effective May 13, 2015, as shown by the records of this office.

I further certify that this is an electronically transmitted certificate authorized by section 15.16, Florida Statutes, and authenticated by the code noted below.

The document number of this limited liability company is L15000086200.

Authentication Code: 150515161744-800272931508#1

Given under my hand and the Great Seal of the State of Florida at Tallahassee, the Capital, this the Fifteenth day of May, 2015

TO ST. LINE

Ken Detzner Secretary of State