# L150000966661

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	idress)	. ,,
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	ısiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



500279126205

11/16/15--01027--014 \*\*25.00



### **COVER LETTER**

Name of Person Area Code Daytime Telephone Number  Enclosed is a check for the following amount:	Division of Cor	porations		
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:  Edward Harary  Name of Person  9F Digital, L1.C  Firm/Company  2961 SW 19th Terrace  Address  Miami, FL 33145  City/State and Zip Code ed@gfiforu.com  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Edward Harary  305 469-4875  at (		LLC		
Please return all correspondence concerning this matter to the following:    Edward Harary	SUBJECT:	Name of Limi	ted Liability Company	
Please return all correspondence concerning this matter to the following:    Edward Harary				
Edward Harary    Name of Person	The enclosed Articles of	Amendment and fec(s) are sub-	mitted for filing.	
Name of Person  9F Digital, LLC  Firm/Company  2961 SW 19th Terrace  Address  Miami, FL 33145  City/State and Zip Code ed@gfiforu.com  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Edward Harary  305 469-4875 at (	Please return all correspo	ndence concerning this matter t	to the following:	
9F Digital, LLC  Firm/Company  2961 SW 19th Terrace  Address  Miami, FL 33145  City/State and Zip Code ed@gfiforu.com  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Edward Harary  305 469-4875 at (		Edward Harary		
Firm/Company  2961 SW 19th Terrace  Address  Miami, FL 33145  City/State and Zip Code ed@gfiforu.com  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Edward Harary  305 469-4875  at (			Name of Person	
Address  Miami, FL 33145  City/State and Zip Code ed@gfiforu.com  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Edward Harary  Name of Person  Area Code  \$25.00 Filing Fee Certificate of Status  Certificate Copy.  (additional copy is enclosed)  Certified Copy  Certified Copy		9F Digital, LLC		
Address  Miami, FL 33145  City/State and Zip Code ed@gfiforu.com  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Edward Harary  305 469-4875 at (			Firm/Company	
Miami, FL 33145  City/State and Zip Code ed@gfiforu.com  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Edward Harary  305 Area Code  Daytime Telephone Number  Enclosed is a check for the following amount:  \$25.00 Filing Fee Certificate of Status  Certified Copy (additional copy is enclosed)  Certified Copy  Certified Copy  Certified Copy  Certified Copy  Certified Copy  Certified Copy		2961 SW 19th Terrace		·
City/State and Zip Code  ed@gfiforu.com  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Edward Harary  305 469-4875  at (			Address	
E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Edward Harary  305  Area Code  Daytime Telephone Number  Enclosed is a check for the following amount:  \$\frac{1}{2}\$		Miami, FL 33145		
E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Edward Harary  305  469-4875  at (			City/State and Zip Code	
For further information concerning this matter, please call:  Edward Harary  305 469-4875  at (	•			
Edward Harary  Name of Person  Name of Person  Area Code  Daytime Telephone Number  Enclosed is a check for the following amount:  \$\frac{1}{2}\$\$\$ \$25.00 \text{ Filing Fee}\$		E-mail address: (t	o be used for future annual report i	notification)
Name of Person  Area Code  Daytime Telephone Number  Enclosed is a check for the following amount:  \$\int_{\text{S}}\$ \\$25.00 \text{ Filing Fee & } \Bigcip \\$55.00 \text{ Filing Fee & } \Bigcip \\$60.00 \text{ Filing Fee, } \\ \text{Certificate of Status & } \\ \text{(additional copy is enclosed)} \text{Certified Copy}	For further information c	oncerning this matter, please ca	11:	
Enclosed is a check for the following amount:  \$\begin{align*} \text{Enclosed is a check for the following amount:} & S5.00 Filing Fee &	Edward Harary		305 469-4875	5
\$25.00 Filing Fee \$\Bigcup \$30.00 Filing Fee & \Bigcup \$55.00 Filing Fee & \Bigcup \$60.00 Filing Fee, \text{Certificate of Status & Certificate of Status & Certified Copy}	Name o	f Person	Area Code Day	nime Telephone Number
Certificate of Status	Enclosed is a check for the	ne following amount:	•	
	_		Certified Copy.	Certificate of Status & Certified Copy

#### 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

FILED

2015 NOV 16 AN 10:55

SECRETARY OF STATE

9F Digital LLC	
(Name of the Limited Liability Compa (A Florida Limited	iny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company	were filed on June 2, 2015 and assigned
Florida document number L15000096661	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	vility company here:
Radar Content LLC	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	2961 SW 19th Terrace
(Principal office address MUST BE A STREET ADDRESS)	Miami, FL 33145
Enter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her	
	Ξ'
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
•	Florida
The second secon	, Florida 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 = M: $AMBR = A$	anager uthorized Member		
<u>Title</u>	Name	Address	Type of Action
			Add
			☐ Remove
	*		□ Change
			Add
			□ Remove
			Change
			□ Add
			□ Remove
		Albertal -	Change
			Add
			☐ Remove
			☐ Change
·		· · · · · · · · · · · · · · · · · · ·	
		<u></u>	Remove
			Change
<del></del>			Add
			☐ Remove
		-	<b>D</b> Chamas

<del></del>		
,		
		6183
		ACK PIBS
	092; 54 -	-
		AM
		<u></u>
	夏雨	90
Effective date, if other than the date of filing:	(optional)	
If an effective date is listed, the date must be specific and cannot be prior to date of filing or mor <b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing	re than 90 days after filing.) Pursuant to 605.0 requirements, this date will not be listed	207 as
document's effective date on the Department of State's records.		
he record specifies a delayed effective date, but not an effective tir	ma at 12:01 a.m. on the parlier	
The 90th day after the record is filed.	ne, at 12.01 a.m. on the taller	Oi.
October 30 2015		
Dated Children, 2015		
(1)		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00