## L15000115428

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DATE:

7/13/15

NAME:

LINK MEDIA FLORIA, LLC

TYPE OF FILING: AMENDMENT

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**AUTHORIZATION: ABBIE/PAUL HODGE** 

## **COVER LETTER**

Division of Co			
Link Medi	a Floria, LLC		
30b3EC1;	Name of Lim	nited Liability Company	
Γhe enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspondence	ondence concerning this matter	to the following:	
	Sarah McGarrell		
		Name of Person	
	Gennari Aronson, LLP		
		Firm/Company	
	300 First Avenue, Suite 30	00	
		Address	
	Needham, MA 02494		
		City/State and Zip Code	
	smcgarrell@galawpartners.		
		to be used for future annual report notif	ication)
for further information of	concerning this matter, please c	all:	
Sarah McGarrell		781 719-9816	
Name o	of Person	at () Area Code Daytima	e Telephone Number
Enclosed is a check for t	he following amount:		
\$25.00 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
			21

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS: 10
Registration Section
Division of Corporations
Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ထဲ **5** 

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Link Media Floria, 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 July 9, 2015 and assigned Florida document number L15000115428 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Link Media Florida, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: Enter Florida street address , Florida City 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.

Page 1 of 3

If Changing Registered Agent, Signature of New-Registered Agent

**လ၊** ငဲဝဲ 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	
			□ Remove	
			Change	
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			Character (Character)	
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	/s/ Alex B. Rozek	ignature of a w-	mhar or outher!	ed representative of	o mambo-	ÉÑ	2	- Caragonia
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