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COVER LETTER

	•		COVER LETTER	•	
	gistration Sec dision of Corp				
SUBJECT:	Epic Wins, L	LC			
SUBJECT.		Name of Lim	ited Liability Company		
The enclosed	d Articles of A	mendment and fee(s) are sub-	mitted for filing.		
Please return	all correspon	dence concerning this matter	to the following:		
		Ronald P. Stone			
			Name of Person		
		Epic Wins, LLC			
			Firm/Company		
		3080 Bellaire Ranch Drive	, Suite 522		
			Address	·	
		Fort Worth, TX 76109			
			City/State and Zip Code		
		ronstone44@gmail.com	to be used for future annual re		···
For further is	nformation co	ncerning this matter, please ca		port nouncation)	
Ronald P. S			817 412- at ()	0505 Daytime Telephone N	
	Name of	Person	Area Code	Daytime Telephone N	lumber
Enclosed is	a check for the	e following amount:			
□ \$25.00 H	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclo	Ce sed) Ce	.00 Filing Fee, rtificate of Status & rtified Copy ditional copy is enclosed)

MAILING ADDRESS:

TO:

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

Epic Wins, 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 __L15000118350 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Flogging Media, 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

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
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			Remove
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ffective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot be prior to date ote: If the date inserted in this block does not meet the applicable socument's effective date on the Department of State's records.	e of filing or more than 90 days after filing.) Pursuant to 605.020 statutory filing requirements, this date will not be listed as
	offication time at 17:01 and at the applica
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Page 3 of 3

Filing Fee: \$25.00