# L15000143489

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**S Warren** SEP 1 3 2016

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Optimal Advertising, 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:
Benjanin CASEY Name of Person
West End Equity Partners, LLC
20301 Grande OAK Blvd Unit 118-24
Estero, FL 33928  City/State and Zip Code  Demacdec C Y Ahoo. Com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Benjamin Casey at 305 240 4047  Name of Person Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Certificate of Status Status Status Scale Certificate of Status Status Scale Certificate of Status Scale Certificate Organization Certificate of Status Scale Certificate Organization Certificate of Status Scale Certificate Organization Certificat

### MAILING ADDRESS:

Registration Section
Division of Corporations P.O. Box 6327 Taliahassee, 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** 

Optimal Advertised Liability Com (A Florida Limited (A Florida Limited)	pany as it now appears on ed Liability Company)	LLC our records.)
The Articles of Organization for this Limited Liability Compared Florida document number <u>L15000/4348</u> .9	ny were filed on	$\frac{21/3015}{$ and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited line.  West End Equity Parts  The new name must be distinguishable and captain the words "Limited Lie	vers, LL	nation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	<del></del>	,
(Principal office address MUST BE A STREET ADDRESS)	<del> </del>	
Enter new mailing address, if applicable:		SSERV OF D
(Mailing address MAY BE A POST OFFICE BOX)	<del></del>	15. 73.
		Par o
B. If amending the registered agent and/or registered registered agent and/or the new registered office address have a Name of New Registered Agent:		r records, enter the name of the new
New Registered Office Address:		
The Registres State Hadison.	Enter Florida s	treet address
		, Florida
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agen	<u>nt:</u>	
hereby accept the appointment as registered agent and ag	gree to act in this capa	acity. 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 **Title** <u>Name</u> **Address Type of Action** □ Add ☐ Remove ☐ Change ☐ Add ☐ Remove ☐ Change □ Add □ Remove ☐ Change \_□ Add ☐ Remove ☐ Change □ Add ☐ Remove 77 ☐ Change U نن □ Remove ☐ Change

. If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
(If an e Note: docur	tive date, if other than the date of filing:
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: e 90th day after the record is filed.
Dated	September 4, 2016.  Signature of a promber or authorized representative of a member
	Benjamin A. Casey  Typed or printed name of signee
	Page 3 of 3
	I HELD VID

Filing Fee: \$25.00