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TALL AHASSES, FLORIDA

SEP 1 9 2016 S. YOUNG

COVER LETTER

TO:	Registration Se Division of Cor	ection porations		
CUDIE		CKY DIGITAL LLC		
SUBJE	CI:	Name of Lim	ited Liability Company	
The enc	losed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please r	eturn all correspo	ondence concerning this matter	to the following:	
		FRANCISCO E CENTEN	O, Enrolled Agent and Registered A	agent
			Name of Person	
		OTR GROUP CORPORA	TION (Tax Firm)	<u> </u>
			Firm/Company	6 SEP
		15757 Pines Blvd Suite 25	1	P 15 AN 10: 55
Address				
		Hollywood FL 33027		AM 10: 55
			City/State and Zip Code	
		fc@accountingTAXgroup.c		
			to be used for future annual report notifi	ication)
For furt	her information c	oncerning this matter, please c	all:	
FRANCISCO E CENTENO, EA		954 394-2984 at ()		
	Name o	f Person		Telephone Number
Enclose	d is a check for th	ne 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)
	Registr Divisio P.O. Bo	ING ADDRESS: ration Section on of Corporations ox 6327 assee, FL 32314	STREET/COURIE Registration Section Division of Corpora Clifton Building 2661 Executive Cer	n utions

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

THE BLACKY DIGITAL LLC	
(<u>Name of the Limited Liability Company as it now ap</u> (A Florida Limited Liability Company	pears on our records.) ny)
The Articles of Organization for this Limited Liability Company were filed on Florida document number L16000062730	11/30/2015 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company	<u>/ here</u> :
The new name must be distinguishable and contain the words "Limited Liability Company," the	he designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	5
(Principal office address MUST BE A STREET ADDRESS)	SEP AF
	<u> </u>
	2
Enter new mailing address, if applicable:	ā se
(Mailing address MAY BE A POST OFFICE BOX)	55 GH
B. If amending the registered agent and/or registered office address registered agent and/or the new registered office address here:	on our records, enter the name of the new
Name of New Registered Agent:	
New Registered Office Address:	
	Florida street address
	, Florida
City	Zin 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

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	NAHUEL, EDUARDO P	15757 PINES BLVD	
		SUITE 251	■ Remove
		HOLLYWOOD FL 33027	☐ Change
			Add
			□ Remove
			Gliange Like IARN
			Remove Constitution of Change
			☐ Change →
			□ Remove
			☐ Change
	· · · · · · · · · · · · · · · · · · ·		□ Add
			☐ Remove
			Change
			Add
			□ Remove
			☐ Change

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Effective date, if other than the date of filing:	(optional)
f an effective date is listed, the date must be specific and cannot b	pe prior to date of filing or more than 90 days after filing.) Pursuant to 605.0 applicable statutory filing requirements, this date will not be listed
document's effective date on the Department of State's re	
no record enecifies a deleved effective data.	when an effective time at 10:01 are an all the
The 90th day after the record is filed.	ut not an effective time, at 12:01 a.m. on the earlier
September 01 2016	
Dated September 01	\ ·
X 17\ (11\) /	Ma

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00