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## FLORIDA DEPARTMENT OF STATE Division of Corporations

September 27, 2016

KAREN STEPHEN 20455 NW 28TH CT MIAMI, FL 33056 US

SUBJECT: MIAMI SAVVY ADVERTISING AND PUBLISHING, LLC

Ref. Number: L16000115700

We have received your document for MIAMI SAVVY ADVERTISING AND PUBLISHING, LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Yasemin Y Sulker Regulatory Specialist II

Letter Number: 516A00020762

Thank will carry supper supper

## ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

Miami Savvy Advertising an	_	•			
( <u>Name of the Limite</u> ()	d Liability Co A Florida Limi	mpany as it now appear ted Liability Company)	rs on our records.)		<del></del>
The Articles of Organization for this Limited Lia	bility Compa	any were filed on	06/15/2016	and	l assigned
Florida document numberL16000115700					
This amendment is submitted to amend the follow	wing:				
A. If amending name, enter the new name of t	the limited l	liability company he	ere:		
N/A					
The new name must be distinguishable and contain the wo	rds "Limited L	iability Company," the d	lesignation "LLC" or th	ne abbreviatio	n "L.L.C."
Enter new principal offices address, if applica	ble:				
(Principal office address MUST BE A STREET		 ()			_
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	110011000	Miami Savvy A	dv and Pub/My Miar	mi Mag	
Enter new mailing address, if applicable:		Miami Savvy A P.O. Box 27894	<u> </u>	mi Mag	
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Enter new mailing address, if applicable:		P.O. Box 27894	11	mi Mag	16
Enter new mailing address, if applicable: <u>(Mailing address MAY BE A POST OFFICE B</u>	8 <u>0x)</u>	P.O. Box 27894 Miramar, Fl 330	027	2.	
Enter new mailing address, if applicable:	8 <u>0X)</u> or registered	P.O. Box 27894 Miramar, Fl 330	027	2.	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE B  B. If amending the registered agent and/o	8 <u>0X)</u> or registered	P.O. Box 27894 Miramar, Fl 330	027	2.	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE B  B. If amending the registered agent and/o	8 <u>0X)</u> or registered	P.O. Box 27894 Miramar, Fl 330	027	2.	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE B  B. If amending the registered agent and/oregistered agent and/or the new registered office.  Name of New Registered Agent:	e registered ice address	P.O. Box 27894 Miramar, Fl 330	027	2.	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B  B. If amending the registered agent and/or the new registered offi	e registered ice address	P.O. Box 27894 Miramar, Fl 330 d office address on here:	027	2.	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE B  B. If amending the registered agent and/oregistered agent and/or the new registered office.  Name of New Registered Agent:	e registered ice address	P.O. Box 27894 Miramar, Fl 330 d office address on here:	o27 n our records, <u>en</u>	ter the na	me of the new

## 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 **Type of Action** <u>Name</u> **Address** Title Karen Stephen Owner 20455 N.W. 28 Ct, Miami Fl 33056 ■ Add ☐ Remove □ Change Carmilla Anderson 1770 NW 76 Terr, Miami Fl 33147 Asst ■ Add ☐ Remove ☐ Change \_□ Add □ Remove ☐ Change .⊥. □ Remove ☐ Remove ☐ Change □ Add ☐ Remove \_□ Change

Please add FEIN# 81-3782868 to Sunbiz listing. Number was assigned on Sept.	8th 2016 through IRS.GOV
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ctive date, if other than the date of filing:  effective date is listed, the date must be specific and cannot be prior to date of filing or more that	an 90 days after filing.) Pursuant 6 605
If the date inserted in this block does not meet the applicable statutory filing requirement's effective date on the Department of State's records.	airements, this date will not be list
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ecord specifies a delayed effective date, but not an effective time,	at 12:01 a.m. on the earlie
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Page 3 of 3

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