L16000167690

(Re	equestor's Name)	
(Ac	ddress)	
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(Ci	ty/State/Zip/Phone	= #)
PICK-UP	MAIT	MAIL
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Certified Copies	Certificates	of Status
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Special Instructions to	Filing Officer:	
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COVER LETTER

TO:

Tallahassee, FL 32314

	gistration Se vision of Cor					
SUBJECT:		CMEDIA, LLC				
SUBJEC1:		Name of Lim	ited Liability Company			
The enclose	d Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please retur	n all correspo	ndence concerning this matter	to the following:			
		Kenneth Ferguson				
			Name of Person			
		LIVE LINK MEDIA, LLC				
			Firm/Company			
7104 Catalonia Ave						
			Address			
		Jacksonville, Florida 3221	7			
			City/State and Zip Code	* * * * * * * * * * * * * * * * * * * *		
		Ferguson.Ken.Wayne@Gm	nail.com to be used for future annual report no			
For further	information c	oncerning this matter, please c		uncation) ,		
Kenneth Fe			904 613-9811			
	Name o	f Person	at () Area Code Dayti	me Telephone Number		
Enclosed is	a check for th	ne following amount:				
呂 \$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)		
	ailing Addres		Street Address:	ootion		
	-	orporations	Registration S Division of Co			
	O. Box 632		The Centre of			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION.

2023 NOV -9 PM 5: 40

LIVE LINK MEDIA, LLC

(Name of the Limited Liability Company as it now appears on our records.) OF OFATE (A Florida Limited Liability Company)

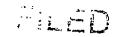
The Articles of Organization for this Limited Liability Company Florida document number L16000167690	were filed on September (08, 2016 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ing: se limited liability company here: se "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." le: 4DDRESS) Santa Monica, CA, 90405 Santa Monica, CA, 90405 Santa Monica, CA, 90405 Stered office address on our records, enter the name of the new registered	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	712 Marine St.	
(Principal office address MUST BE A STREET ADDRESS)	Santa Monica, CA, 9040	5
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, o	enter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street	address
	City	_, Florida
	CII.	Zīp 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 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 2023 NOV -9 PH 5: 40	Type of Action
MGR	Luke McGurrin	712 Marine St., Santa Monica, CA, 90405 STATE	≡ Add
			□Remove
			□Change
 -			□Add
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			Change
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n effective date te: If the da	e is listed, the d te inserted in	an the date o late must be spec this block doe the Departme	ific and cannot is not meet the	applicable s	of filing or r tatutory filin	nore than 90 ng requiren	(option days after finents, this o	ling \ Pureu	int to 605.0207 of be listed as
s med.		ffective date, b		ctive time, a	t 12:01 a.m.	on the earl	ier of: (b)	The 90th	day after the
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Filing Fee: \$25.00