L170000 97003

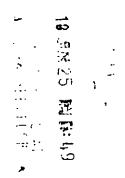
(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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JUN 26 2018



June 12, 2018

OSCAR MORALES II 3728 AVALON PARK EAST BLVD ORLANDO, FL 32828 US

SUBJECT: HIGHFLYER MEDIA LLC

Ref. Number: L17000097003

We have received your document for HIGHFLYER MEDIA LLC and your check(s) totaling \$60.00. 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 the corrected original and one copy of 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.

Judy A Leggett Regulatory Specialist II Registration Section

Letter Number: 218A00012194

COVER LETTER

TO:	Registration Se Division of Cor			
SUBJE		ER MEDIA LLC		
SUBJE	C1:	Name of Lim	ited Liability Company	
		Amendment and fee(s) are sub ndence concerning this matter		
		Oscar Morales II		
			Name of Person	
			Ficm/Company	
		3728 Avalon Park East Bl	vd	
			Address	
		Orlando, FL 32828		
		morales0787@gmail.com	City/State and Zip Code	
		E-mail address: (to be used for future annual report notif	fication)
For furt	her information c	oncerning this matter, please co	ull:	
Oscar N	Morales II		813 600-0089 at ()	
	Name o	f Person	Area Code Daytime	e 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)
	ман.	ING ADDRESS:	STREET/COURI	ER ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HIGHFLYER MEDIA LLC		
(Name of the Limited Liability Compa (A Florida Limited l	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on	and assigned
Florida document number 1.17000097003		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here;	
The Olán Group, LLC		ب ج
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:	3728 Avalon Park East Blvd	7.1. 19.0
(Principal office address MUST BE A STREET ADDRESS)	Orlando FL, 32828	
		8
Enter new mailing address, if applicable:	3728 Avalon Park East Blvd	19
(Mailing address MAY BE A POST OFFICE BOX)	Orlando FL, 32828	
		· · · · · · · · · · · · · · · · · · ·
B. If amending the registered agent and/or registered o	ffice address on our records, e	nter the name of the nev
registered agent and/or the new registered office address her		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Floric	
	City	Zip 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 = M $AMBR = A$	lanager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			D Add
			Remove
			Change
	V-7, (Carlotte)		Add
			☐ Remove
			☐ Change
-			
			☐ Remove
			Change
			Remove
			Change
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			☐ Remove
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Effective date, if other	than the date of filing:		(optio	nal)
(If an effective date is listed, the Note: If the date inserted	e date must be specific and car in this block does not mee	anot be prior to date of filin t the applicable statutory	g or more than 90 days after to filing requirements, this	iling.) Pursuant to 605.0 date will not be listed
document's effective date	on the Department of State	e's records.	<u> </u>	
the record specifies a) The 90th day after		e, but not an effect	ive time, at 12:01 a	.m. on the earlie
Dated 2 June		2018		
	0			
1	/// I			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00