## 117000122231

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## **COVER LETTER**

Gold Coast Legal Video & Presentation, LLC SUBJECT: 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: Douglas Frey Name of Person Firm/Company 1420 Brickell Bay Drive #804 Address Miami, Fl. 33131 City/State and Zip Code doug@brickell.digital E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Douglas Frey 405-4722 Name of Person Daytime Telephone Number Enclosed is a check for the following amount: ■ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) (additional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section Division of Corporations

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

FILED

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Gold Coast Legal Video & Presentation, LLC

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

(A Florida Limited I	Liability Company)	MALL MASSEE, FL
The Articles of Organization for this Limited Liability Company Florida document number £17000122231	were filed on 06/05/2017	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
Brickell Digital, LLC		
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LL	.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1420 Brickell Bay Drive #80	4
(Principal office address MUST BE A STREET ADDRESS)	Miami, FL 33131	
Enter new mailing address, if applicable:	1420 Brickell Bay Drive #80	4
(Mailing address MAY BE A POST OFFICE BOX)	Miami, FL 33131	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here.  Name of New Registered Agent:		ds, enter the name of the no
New Registered Office Address:	Enter Florida street address	
		lorida
	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 of removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
<del></del>			Add
			□ Remove
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
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E. Effective date, if other than the date of filing:	
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the (b) The 90th day after the record is filed.	e earlier of:
Dated 34NUARY 15T 2019	
Signature of a member of authorized representative of a member	<del></del>
Douglas Frey	

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Typed or printed name of signee

Filing Fee: \$25.00