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R. WHITE DEC 1 2 2020 :

COVER LETTER

Registration Section
Division of Corporations

TO:

KASSEL I	MEDIA VENTURES LLC		
SOBJECT:	Name of Lir	nited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	LOVETTE DOBSON		
		Name of Person	
	INCFILE.COM LLC		
	·-··	Firm/Company	
	17350 STATE HWY 249	SUITE 220	
		Address	
	HOUSTON TX 77064		
		City/State and Zip Code	
	EFILE1234@INCFILE.CO		16 . Y
		to be used for future annual report not	ification)
For further information of	concerning this matter, please c	all:	
LOVETTE DOBSON		888 462-3453	
Name o	of Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for t	he 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)
Registi Divisio P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 ussee, FL 32314	STREET/COUR Registration Section Division of Corpo Clifton Building 2661 Executive Co	on rations

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

KASSEL MEDIA	ار بر الراب ال	
(<u>Name of the Limited Liability Compa</u> (A Florida Limited l	iny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Plorida document number L17000128604	were filed on 06/13/2017 and assigned	
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
GAT MONKEY LLC		
he new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	16450 STEDHAM CIR, APT 304	
Principal office address MUST BE A STREET ADDRESS)	DUMFRIES, VA 22025	
Enter new mailing address, if applicable:	16450 STEDHAM CIR, APT 304	
Mailing address MAY BE A POST OFFICE BOX)	DUMFRIES, VA 22025	
B. If amending the registered agent and/or registered of egistered agent and/or the new registered office address here Name of New Registered Agent:		
New Registered Office Address:	Enter Floridu street address	
	, Florida	

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>	Address	Type of Action
AMBR	GREGORY KASSEL	16450 STEDHAM CIR, APT 304	
		DUMFRIES, VA 22025	Remove
			⊟ Change
AMBR STEVEN KASSEL	16450 STEDHAM CIR, APT 304		
		DUMFRIES, VA 22025	Remove
		Change	
			Add
			Remove
			☐ Change
			Remove
		Change	
	<u> </u>	Add	
		·	□ Remove
		Change	
			Remove
			Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

E. Effective date, if other than the date of filing:(optional)
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
f the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: b) The 90th day after the record is filed.
Dated OCTOBER 10 2020
Signature of a member or authorized representative of a member
GREGORY KASSEL - AMBR

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Typed or printed name of signee

Filing Fee: \$25.00